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## Minority Supervisees' Experiences with Parallel Processing in Counseling Supervision

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*Walden University*

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# Walden University

College of Social and Behavioral Health

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Dorothy Moore

has been found to be complete and satisfactory in all respects,  
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Abstract

Minority Supervisees' Experiences with Parallel Processing in Counseling Supervision

by

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MSEd, Old Dominion University, 2010

BS, Old Dominion University, 2008

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Counselor Education and Supervision

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## Abstract

The population of mental health counselors mirrors the diversity of the people served by the counseling profession. Becoming a professional counselor in the United States requires a designated number of clinical supervision hours. The supervision process is designed to ensure a supervisee is equipped with the skills and develops the professional identity to serve the public. Studies have explored the phenomenon of parallel processing (the processes at work between a supervisee and client reflected in their relationship) from clinical supervisors' perspectives, yet researchers agree that the supervisee initiates the phenomenon, and the voices of supervisees have not been captured. The purpose of this study was to explore the lived experiences of minority supervisees during the phenomenon of parallel processing in clinical supervision. In-depth semistructured interviews were conducted to collect data from six participants who worked in various therapeutic settings. The data analysis was consistent with Smith's interpretative phenomenological analysis. Three themes emerged from the data: (a) a desire to help others, (b) supervisor's contribution to the professional development of the supervisee, and (c) supervisee's perception of the phenomenon of parallel processing. The results of the study expand the definition of the occurrence of the phenomenon of parallel processing and the impact of the supervisor's response and provide data for the need of increased attention to intersectionality in training clinical supervisors. The findings of this study have potential implications for positive social change that include a greater commitment to social justice and congruence with the mission statement of the American Counseling Association.

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## Dedication

This accomplishment is dedicated to the memory of Dorethea McCleave, my mother, my teacher, and always in my heart.

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## Chapter 1: Introduction to the Study

### **Introduction**

This hermeneutic phenomenological study was focused on exploring the lived experiences of minority supervisees as they engage in the phenomenon of parallel processing during clinical supervision. Parallel processing is a phenomenon that can occur within the clinical supervision relationship. Searles (1955) defined the phenomenon of parallel processing as the processes at work between a supervisee and client being reflected in the relationship between a supervisor and supervisee. As the phenomenon of parallel processing has evolved, it has become the process used by many clinical supervisors to work with supervisees from a relational perspective (Sarnat, 2019; Zetzer et al., 2020). This chapter includes background related to the scope of the proposed study. I provide a brief discussion of the theoretical and conceptual frameworks used for this study, as well as the assumptions and limitations present in the study.

### **Background**

An abundance of research exists on the phenomenon of parallel processing, multiculturalism, and intersectionality (Gundle, 2015; McKinley, 2019; Novoa-Gomez, 2019; Peters, 2017; Sarnat, 2019; Searles, 2015; St. Arnaud, 2017; Watkins, 2017; Zetzer, 2015; Zetzer et al., 2020). Many researchers have concluded that parallel processing, intersectionality, and multiculturalism are resources that can contribute to successful clinical supervision (Berger et al., 2018; Bernard & Goodyear, 2019; Peters, 2017; St. Arnaud, 2017; Zetzer, et. al., 2020). In fact, Remley and Herlihy (2019), Searles

(2015), and Watkins (2017) argued that parallel process is a phenomenon supervisors use to help supervisees gain clinical insight and develop professionally.

Clinical supervision is a relationship that facilitates the development of the supervisee (Mitchell & Butler, 2021). The phenomenon of parallel processing could be a dynamic of that relationship (Zetzer et. al., 2020). Remley and Herlihy (2019) stated that skilled supervisors are aware of and address in supervision the phenomenon of parallel process. When the supervisor does not address the behaviors or cognitive processes present in clinical supervision, the clinical and professional needs of the supervisee are unmet (Bernard & Goodyear, 2019; Sarnat, 2019; Zetzer et. al., 2020). Beyond pointing out a parallel process, there should be metacommunication to discuss the supervisee patterns in the supervisor–supervisee relationship that mirrors patterns in the supervisee–client relationship or vice versa (Bernard & Goodyear, 2019).

The process of clinical supervision requires attention to diversity and the dynamics of multiculturalism. Watkins (2017), Zetzer (2015), and Zetzer et al. (2020) cited the need for research that incorporates diversity in the study of the phenomenon of parallel processing and clinical supervision. Section F.2.b of the American Counseling Association (ACA) code of ethics mandates a supervisor attend to the multicultural dynamics of the supervisee. Furthermore, Peters (2017) discussed the need for counselor educators and supervisors to promote the intersectional nature of identities in supervisees. Although there has been research on intersectionality, researchers have given little attention to its importance in clinical supervision (Thompson, 2018). Watkins (2017)

stated that apart from gender; all diversity variables have been absent from the literature exploring the phenomenon of parallel processing.

A clinical supervisor's use of the phenomenon could increase a supervisee's self-awareness of this unconscious replication. As a result of a clinical supervisor's use of the phenomenon of parallel processing and the consideration of their intersectionality, supervision could be positively impacted (Gundle, 2015; Zetzer, 2015; Zetzer et al., 2020). Gundle (2015) and Zetzer et al. (2020) focused on parallel processes as a learning tool in supervision. The ability to allow supervisees to voice their experience with the phenomenon of parallel processing is highlighted and indicated as a need for future research. According to Watkins (2017), the phenomenon of parallel processing is a tool supervisors can use to help supervisees self-reflect. A supervisee's self-reflection could result in increased self-awareness.

Supervision is the precursor for professional development and provides an individually tailored space for these conversations. Peters (2017) discussed the need for counselor educators and supervisors to promote the intersectionality of supervisees. Peters (2017) cited multicultural complexity and intersectionality as components of supervision that would give a synopsis of three dimensions of identities: internal, external, and ideology. The current demographics of the Council for Accreditation of Counseling and Related Educational Programs (CACREP), specifically counseling and counselor education training programs, note the diverse makeup of current counseling students. Considering these demographics in counselor training and supervision is essential (Peters, 2017; Thompson & Bridges, 2019).

### **Problem Statement**

Researchers agree that the phenomenon of parallel processing has been a part of the supervision process for more than 60 years (Sarnat, 2019; Searles, 2015, Watkins, 2017, Zetzer et al., 2020). Brown-Rice and Furr (2016) stated that 10% of supervisees are ill-suited for the profession of counseling. The phenomenon of parallel processing can enrich the supervision process if a supervisor responds to a supervisee's presentation of problems in professional competence (Sarnat, 2019; Watkins, 2017). In providing clinical supervision, a clinical supervisor is responsible for aiding supervisees in skills and professional identity development that prepares them to be effective counselors. A supervisor can use this opportunity to help a supervisee on an affective level. The phenomenon of parallel processing is one such opportunity.

Additionally, the question of consideration for the diversity of a supervisee and how the supervisee experiences the phenomenon of parallel processing also remains unanswered in the literature (Sarnat, 2019; Watkins, 2017; Zetzer, 2015; Zetzer et al., 2020). Moreover, the role of intersectionality, the overlapping marginalized identities an individual identifies with, needs to be addressed in research regarding the preparation of supervisees (Thompson & Bridges, 2019). Addressing this issue is essential to the profession of counselor education and supervision; Section F2.b. of the ACA code of ethics (2014) mandates counseling supervisors be aware of and address the role of multiculturalism and diversity in the supervisory relationship.

### **Purpose of the Study**

The purpose of this qualitative hermeneutic phenomenological study was to explore the lived experiences of minority supervisees who have experienced the phenomenon of parallel processing during clinical supervision. The phenomenon of parallel processing occurs when a supervisee's issues become reflective of the symptoms of the people they are helping (Gundle, 2015; Waugaman, 2015). Based on the identified gap in the literature of exploring the phenomenon of parallel processing while considering the diversity of a supervisee, I explored how minority supervisees experience parallel processing in concert with diversity issues present within the counselor–client relationship. As a result, the data gathered from this study could provide insight for the clinical supervisor to aid the supervisee with professional development and clinical skills needed when working with diverse populations (Gundle, 2015; Peters, 2017; Phillips et al., 2017).

### **Research Question**

What are the lived experiences of minority supervisees during the parallel process phenomenon in counseling supervision?

### **Theoretical Framework**

Intersectionality is associated with qualitative research methods and used as a methodological tool for the central role of giving voice elicited through interviews and observation (Atewologun, 2018; Kelly et al., 2021). Intersectionality is an adopted theoretical orientation in women and gender studies that grew from the work of a Black feminist scholar and a social theorist. Kelly et al. (2021) stated that in addition to



transforming the exploration of the humanities and social sciences, efforts are being made to integrate the theory of intersectionality into other health-related disciplines.

The concept of intersectionality was initially introduced by Black feminist legal scholar Kimberle Williams Crenshaw in 1989 (Grzanka, 2018). The idea was used to explain the intersecting nature of identity and sociopolitical oppression specifically related to the exclusion of Black women from feminist scholarship and thought (Carastathis, 2014; Maracek, 2016). The term has become mainstream and is used today to explore how various identities (e.g., race, class, gender, sexual orientation, disability, nationality, and religion) intersect to create social realities (Green & Flasch, 2019).

Intersectionality is an essential concept of the nature of life experiences among members of any society (Moradi & Grzanka, 2017). The theory of intersectionality provides an orienting lens for the research question that explores the meaning that minority supervisees ascribe to the phenomenon of parallel processing (Al-Faham et al., 2019; Moradi & Grzanka, 2017). Although intersectionality was introduced as a concept centered on women of color, the design of intersectionality was always inclusive along the axes of identity (Al-Faham et al., 2019).

### **Conceptual Framework**

The underlying framework that guided this study was phenomenology. Phenomenology is the philosophical study of lived or experiential meaning. Hermeneutic phenomenology illuminates the meaning implied in actions and relationships with others (Sloan & Bowe, 2014; Smith, 2009; van Manen, 1997). This process is used to describe and interpret these meanings in the way they emerge. The approach succeeds when these

meanings are recognizable (van Manen, 1997). Essence is a concept of hermeneutic phenomenology, and the idea of essence is explained as the significance attached to it (van Manen, 1997). Heidegger (1962) stated that as the ontological clue gets progressively worked out in the hermeneutic of the dialectical, “it becomes increasingly possible to grasp the problem of ‘Being’ in a more radical fashion” (p. 47).

### **Nature of the Study**

This study was qualitative in nature. Specifically, I applied a hermeneutic phenomenological approach, a qualitative tradition that explores in-depth the lived experiences of individuals and a shared phenomenon. In addition to a phenomenological framework, and due to the emphasis on the exploration of the lived experiences of minority supervisees during the parallel process phenomenon in counseling supervision, intersectionality theory was the lens I analyzed the data through. In concert with the hermeneutic design, I used interpretative phenomenological analysis (IPA) as a part of the research design to review and analyze the data. IPA allows researchers to focus on the individual and emphasize their personal experience of the phenomenon under investigation. IPA allowed me to be both descriptive and interpretive by encouraging supervisees to intentionally remember experiences with parallel processing and provide an account of their thoughts and feelings during that time (Heidegger, 1962; Husserl, 2008; van Manen, 1997). The purposive sample for this study included minority counseling supervisees who have attended a CACREP counseling program. Supervisees could be in their second internship term or state residency. The sample included minorities of race, sex, ethnicity, gender, religion, and lesbian, gay, bisexual, transgender,

and queer (LGBTQ) populations. I collected data using semistructured interviews, and I planned to interview six to 10 minority supervisees to reach saturation (Guest et al., n.d.). I analyzed the data according to the six steps of IPA. An in-depth description of this process is in Chapter 3.

### **Definitions**

*Clinical supervision:* A complex instructional strategy that requires specific skills and balancing competing demands (Bernard & Goodyear, 2019). This relationship is evaluative and hierarchical, extends over time, and has the simultaneous purposes of enhancing the more junior person, monitoring the quality of professional services offered to the clients they see. Clinical supervision is a gatekeeper for those entering the counseling profession and is an ethical responsibility of the clinical supervisor.

*Council for the Accreditation of Counseling and Related Educational Programs (CACREP):* A specialized accrediting body recognized by the Council for Higher Education Accreditation. CACREP's (2008) purpose is to implement minimum standards for counseling and human development graduate-level training programs.

*Minority:* For this study, minority refers to race, sex, ethnicity, sexual orientation, religion, disability, and all other forms of identified social inequality.

*Parallel processing:* "The processes at work currently in the *relationship between* patient and therapist that reflect the *relationship between* therapist and supervisor" (Searles, 1955, p. 135).

*Supervisee:* A counselor who can be a master's level student completing field experience required for graduation, including practicum and 600 hours of internship

(Baltrinic et al., 2021; CACREP, 2018). A supervisee is also a graduate of a CACREP-accredited counseling program. In addition to passing a licensing examination, each state requires an individual to complete a determined number of clinical hours under an approved clinical supervisor (Colburn et al., 2016).

### **Assumptions**

The ontological assumption of this hermeneutic phenomenological study was that reality is subjective as seen by the participants. I assumed the participants' descriptions would accurately define their experiences of the parallel processing phenomenon and that all responses would be honest and truthful. Additionally, I assumed all participants would meet the inclusion criteria of minority supervisee, which was met by supervisees' written responses to an email sent to them (Appendix A). I assumed the participants in this study would have a genuine interest in this topic and a desire to add to the literature related to clinical supervision, minority supervisees, and the phenomenon of parallel processing based on their willingness to participate in the study.

### **Scope and Delimitations**

The specific aspects of the research problem addressed in this study are the phenomenon of parallel processing and the experience of minority supervisees during clinical supervision. A delimitation of the study is the exclusionary criteria of all counselor supervisees. Although all supervisees may have encountered the phenomenon of parallel processing, I was focused on the experiences of minority supervisees to consider the diversity of the supervisee population.

### **Limitations**

One limitation for this study was participants' potential lack of knowledge or understanding of the definition of the parallel process phenomenon. Zetzer et al. (2020) stated that although the phenomenon of parallel processing may be outside of a supervisee's conscious awareness, they are aware of the intensity of their feelings. As a strategy to address this challenge, I defined the phenomenon in my interview protocol. Further, another limitation was the inability to determine how much of the parallel process was outside the participant's conscious awareness, which could diminish the richness of the primary data. As this is a qualitative study, it may be difficult to replicate.

### **Significance**

The purpose of my research was to explore the lived experiences of supervisees as they are engaged in parallel processing during the supervision process. Specifically, I explored how minority supervisees experience the phenomenon of parallel processing in concert with diversity issues present within the counselor–client relationship and surface when processing the case with the supervisor. Zetzer et al. (2020) recommended that further studies into the phenomenon of parallel processing recruit participants from diverse populations. According to Watkins (2017), supervisors ignore the possibility that the parallel process could be a conduit to effectively identify and reduce impartial practices while providing sensitive and effective counseling services.

The findings of this research could improve the multicultural dynamic of clinical supervision (Zetzer, 2015). Researchers could use the data to strengthen supervision best practices. Increased awareness of the phenomenon of parallel processing could contribute

to the development of supervisees' professional identities. According to Peters (2017), an increased ability to apply a more integrative and intersectional framework could facilitate improved practices of multicultural supervision and have many applications to other aspects of the counseling profession. The data from this research could contribute to these factors.

### **Summary**

The focus of this study was the lived experiences of minority supervisees during the phenomenon of parallel processing. Therefore, it was important to use the concept of intersectionality as the theoretical foundation for this study. In addition to the gap in the literature surrounding the impact of the phenomenon of parallel processing, the use of intersectionality as the theoretical lens will lay the groundwork for future research. The phenomenon of parallel processing is associated with the psychoanalytic model of supervision; however, the chain reaction of the phenomenon can occur regardless of the preferred model of supervision (Sarnat, 2019). Morrissey and Tribe (2001) stated that the parallel process intervention in supervision can enhance the supervisory process and the task of teaching and learning for the supervisee. Friedlander et. al (1989) stated that most conceptual models of supervision rely on counseling theory, and the supervisory process encompasses learning, empathy, personal growth, and responsibility. The results of this study could have a positive impact on supervision best practices. From the perspective of social justice, future counselors could gain experiential knowledge on implementing multicultural techniques with the diverse populations they may serve (Atewologun, 2018; Peters, 2017).

## Chapter 2: Literature Review

### **Introduction**

The supervisory relationship is significant in the growth and development of a supervisee, and the parallel process can be a dynamic of that relationship (Gundle, 2015; Peters, 2017; Sarnat, 2019; Watkins, 2017; Waugaman, 2015, Zetzer, 2015; Zetzer et al., 2020). When a clinical supervisor does not address the phenomenon of parallel processing, the supervisor can have difficulty seeing the effects of their relationship with the supervisee, and the professional development of the supervisee can be hindered (Sarnat, 2019). This chapter includes the literature search strategy, theoretical and conceptual frameworks, and a literature review related to the fundamental concepts.

### **Literature Search Strategy**

The search for relevant literature for this study was an iterative process. The search strategy included accessing the Walden University Library, Google Scholar, and purchasing books from the Vita Source bookshelf and Amazon. I used Zotero database management software to collect and organize the literature gathered for the study. I also used a literature search matrix to aid in the organization of articles, which allowed me to use the strategy of reference chaining. This strategy involved perusing the reference lists of relevant literature to build my reference resources.

The Walden University Library has Thoreau's inclusive system to search multiple databases simultaneously. In addition, I searched for relevant peer-reviewed literature in the following databases: APA Psych Info, Google Scholar, Sage, EBSCO, ERIC, SAGE journals, ScienceDirect, and Taylor and Francis Online. I additionally searched for

dissertations on the phenomenon of parallel processing in clinical supervision in the Dissertations and Theses at Walden University, Scholar Works, and ProQuest databases. However, I did not locate specific research related to my study. I found a dissertation that used IPA to explore the experiences of licensed professional counselor interns who discuss personal issues with their supervisors (Stillo, 2018). I searched Google Scholar and Sage databases and combined the terms of *parallel processing* and *clinical supervision*. I located two studies— Zetzer (2015) and Zetzer et al. (2020)—in the Sage database conducted from the supervisor's perspective. I found multiple discussion articles on this topic by searching AP Psych Info and Google Scholar databases.

I used the Thoreau search system to gather literature on the theoretical and conceptual concepts. I explored the EBSCO, ERIC, Google Scholar, and SAGE databases. I combined the relevant terms of *counselor supervision and parallel processing, phenomenology and hermeneutic phenomenology, and diversity and intersectionality*. I limited the search period to 5 years. The SAGE and ERIC databases provided a plethora of research on phenomenology, hermeneutic phenomenology, intersectionality, and qualitative methodology. Google Scholar provided the most recent literature on parallel processing with the modifier of *counselor supervision* added.

## **Theoretical and Conceptual Framework**

### **Phenomenology**

The underlying conceptual framework that guided this study was phenomenology. The focus of the study was to explore the lived experiences of minority supervisees during the phenomenon of parallel processing in clinical supervision. According to van



Manen and Adams (2010) and Peoples (2020), phenomenological research is oriented to the lifeworld as individuals immediately experience it. Peoples (2020) stated the theoretical framework for phenomenological research is always phenomenology. Cuthbertson et al. (2020) explained that phenomenology is a design of inquiry from philosophy and psychology. A researcher uses the experiences described to explore the essence of several individuals who have experienced a phenomenon. The design of hermeneutic phenomenology employs modes of discourse that attempt to merge what people understand intellectually into corporeal, relational, enactive, and situational modalities (van Manen, 1997).

Phenomenology is the study of lived experiences. The process includes an attempt to describe and interpret these meanings in the manner they emerge. Conscious and subconscious sensibilities shape and make meaning of experiences (Burkholder et al., 2019; Peoples, 2020; van Manen & Adams, 2010). Santiago et al. (2020) and van Manen and Adams (2010) stated that phenomenological inquiry does not provide evidence to support a hypothesis. Instead, a researcher strives to understand the feelings and meanings of the phenomenon as lived by a participant. Peoples (2020) explained that phenomenological research and interview questions are limited to experiences. Researchers must ask the client to describe the content of the incident; therefore, the aim is to reveal their lived experiences in their consciousness.

Phenomenology began as a philosophy and evolved to become a variety of methodologies (Sloan & Bowe, 2014). The three strands of phenomenology are descriptive, hermeneutic, and idiography (Hays, 2017; Tomaszewski et al., 2020).

Descriptive phenomenology is a generalized description of a person interacting with the environment. Hermeneutic phenomenology interprets how a person interacts within the environment. Idiography focuses on the particular with detail and a depth of analysis (Hayes, 2017; Smith et al., 2009).

Qutoshi (2018) stated phenomenology is an intellectual engagement in interpretations and meaning making in which a researcher's goal is to understand the lived world of human beings at a conscious level. The process of phenomenology focuses on how individuals perceive interactions and objects. The individual is regarded as the primary source of knowledge (Mousatkas, 1994). According to van Manen (1990), phenomenology is the process of describing how a person can orient to lived experience. Likewise, the process of hermeneutics describes how one interprets the experience, and the participant's reflection is fundamental (Sloan & Bowe, 2014). Cohen et al. (2007) stated the broadest definition for phenomenology is a theoretical point of view advocating the study of an individual's experiences.

### ***History***

The founding father of phenomenology is Husserl, whose philosophy of phenomenology emphasized subjectivity and discovery of the essences of experience (Sloan & Bowe, 2014). Rapport (2017) cited Husserl (1931) as focusing on dividing the subject and object, or consciousness, using transcendental phenomenological processes. This process also requires putting reality on hold, bracketing out all extraneous thoughts using *epoché* or phenomenological reduction. Smith et al. (2009) noted that Husserl wanted to look at the nature of consciousness and called this *transcendental reduction*.

Qutoshi (2018) stated that while Husserl's perspective of phenomenology is a science of understanding human beings deeper by gazing at the phenomenon, the Heideggerian view of interpretive–hermeneutic phenomenology provides a researcher a wider meaning to the lived experience being studied.

Heidegger diverted from Husserl's thought process and described the human experience as “being” (dasein) within the world that interprets itself (Heidegger, 1962, p. 302). Heidegger (1986) stated that to explore dasein is to be concerned with the object of inquiry to be examined. Smith et al. (2009) said that Heidegger's view is the person in context and the phenomenological concept of the shared and relational nature of engagement in the world. Heidegger's perspective focuses on the manifestation and “clearing of being” as dasein experienced the phenomenon from their perception (Heidegger, 1986, p. 5).

### ***Philosophy***

According to Dibley et al. (2020) and Sloan and Bowe (2014), there are different methods of phenomenology divided by their perspectives and grouped into two types: descriptive and interpretive. Hermeneutic phenomenology is a research design of phenomenological methodology among interpretive phenomenological methodologies (Rapport, 2017; Sloan & Bowe, 2014). Hermeneutics is the interpretation of text or language used as a methodology or enhancement of phenomenology that studied the person (Sloan & Bowe, 2014; van Manen, 1990; Webb & Pollard, 2006).

Watts (2014) stated that Heidegger's philosophy was grounded in the meaning ascribed to words. As a result, Heidegger's hermeneutics philosophy evolved and

concluded that being discloses itself based on the individual's interpretation. According to Dibley et al. (2020), the philosophy of phenomenology is a way of thinking. Human science is rationalistic and qualitative researchers using this approach believe the human experience or the phenomenological view of the experience is complex (Sloan & Bowe, 2014; Smith et al., 2009).

### ***Fit for Hermeneutics***

Phenomenology has provided a way of considering the phenomenon of human experience through expression, description, and interpretation (Sloan & Bowe, 2014). Hermeneutic phenomenology attempts to illuminate the meanings implied in actions through relationships with others and succeeds when one can make these meanings recognizable (van Manen, 1997). According to Smith et al. (2009) and Sloan and Bowe (2014), hermeneutic phenomenology uses the features of each of the founders to bring the phenomenon to light as the result of the study and the contribution to knowledge.

### **Intersectionality**

Intersectionality is the theoretical framework that provides the focus for this study. Gillborn (2015) explored intersectionality as an aspect of critical race theory and addressed the concept of intersectionality by explaining how multiple forms of identity, such as race, gender, class, sexual orientation, disability, socioeconomic status, and other forms of inequality, are interconnected. Additionally, intersectionality is the idea that social identities such as race, gender, and class interact to form qualitatively different meanings and experiences based on the individual (Hwang & Beauregard, 2021). This idea challenges the conceptualization of social identities as functioning independently

and presents the perspective that intersectionality is a construct more than a summary of the social groups a person belongs to (Hwang & Beauregard, 2021; Kelly et al., 2021; Warner, 2008).

Intersectionality includes social identities not limited to race, gender, ability, religion, or class (Gillborn, 2015; Warner, 2008). However, these terms can co-exist in one individual and conceptualize as intersectionality (Hwang & Beauregard, 2021; Kelly et al., 2021; Warner, 2008; Warner et al., 2020). The concept of intersectionality in feminist theory became known during the second wave of feminism. Intersectionality emerged as a response to White feminist theorists and the exclusion of African American women from advocating for voting rights (Few-Demo, 2014; Phillips & Cree, 2016).

The feminist movement is credited with helping all women see how the intertwining of their identities influenced relations of oppression and privilege in society at both the individual and structural levels (Thompson & Bridges, 2019). White women within the movement argued that they were oppressed, and their demands for equal rights were ignored. Women of color agreed that their equal rights as women were being ignored and discussed that because of their race, they experienced simultaneous oppressions (Grant et al., 2011). These events contributed to the formation of intersectionality theory.

Crenshaw (1991) introduced intersectionality theory. The concept explains the intersecting nature of identity and sociopolitical oppression that excludes Black women from feminist scholarship and thought (Carastathis, 2014; Maracek, 2016). The term has

since become mainstream and explores how various identities intersect to create social realities (Green & Flasch, 2019).

Intersectionality encompasses multiple aspects of diversity. Kanwal (2021) stated that people are more than simply human. Although commonalities identify aspects of shared biopsychosocial existence, intersectionality is a concept that allows people to become more rigorously aware of the personal, interpersonal, and social aspects of being. Intersectionality should be considered in clinical supervision while maintaining a focus on the development of supervisees (Greene & Flasch, 2019). Multiple researchers have agreed that intersectionality is a concept that addresses the question of how various forms of identity interrelate and provide an individual perspective of experience (Gillborn, 2015; Greene & Flasch, 2019; Kanwal, 2021; Kelly et al., 2021; Thompson & Bridges, 2019).

Hwang and Beauregard (2021) examined how East Asian women understand their work experiences and status as migrant workers in the United Kingdom along with how various contexts inform migrant women's work experiences. The intersectional framework focused on intentionally changing the impact of everyday practices while also linking internal organizational processes with external societal processes (Holvino, 2010). While this study provided a theoretical understanding of intersectionality, Hwang and Beauregard (2021) acknowledged their participants did not represent the minority of East Asian women as their participants were middle-class, professional, and educated and, therefore, did not provide the perspective of East Asian women as migrant workers in the United Kingdom.

Peters (2017) explored the utility of intersectionality and its application in the practice of clinical supervision and its documentation in the counseling literature. The author highlighted that although there has been an expansion of literature focused on multiculturalism and social justice, there is a deficit in research related to clinical supervision (Peters, 2017). Multicultural complexity explains the intricacies of multiple grounds of identity, privilege, and marginalization represented by the intersections. Peters also noted that a singular multicultural framework is no longer adequate for supervision. One framework does not represent the needs and identities of supervisees or clients. Peters (2017) and Thompson and Bridges (2019) agreed that considering multiple identity categories increases active learning. With the expansion of attention to diversity, there is a need for increased efforts from counselor educators and supervisors to consider multicultural complexity and intersecting identities (Peters, 2017)

Pugach et al. (2017) examined social justice in teacher education, focusing on how researchers in the field address students and teacher candidates and the complexities of their identities. The primary theoretical perspective for the review was intersectionality, as the authors stated it represents a robust framework for analyzing the complex nature of an individual's identity (Pugach et al., 2017). Pugach et al. examined the literature and illustrated how researchers of teacher education position student and teacher candidate identities and their complexity. The findings were that there is little acknowledgment of students' or teacher candidates' intersectionality. The examination of the research by Pugach et al. (2017) provides three discursive scaffolds to highlight how intersectionality is linked to positive social change.

Thompson (2018) explored how counselor education and supervision (CES) faculty members could use intersectionality theory in their multicultural pedagogy. The study highlighted how privileged and oppressed identities affect the multicultural pedagogy of CES faculty and how those experiences intentionally or unintentionally contribute to clinical supervision. Thompson found that the personal and professional experiences of the sampled population influence their incorporation of intersectionality in their multicultural pedagogy.

Al-Faham et al. (2019) stated that intersectionality is a lived experience with roots in the feminist movement. Every individual who has a lived experience is composed of multiple labels. Additionally, Tarshis and Baird (2021) stated intersectionality theory addresses power dynamics and is particularly relevant to clinical supervision. There is an exploration of experiences where inequalities and power dynamics based on identities such as race, gender, class, ability, and sexuality may occur. According to Berger et al. (2018), supervision for trauma-informed practice shares all types of supervision issues related to intersectionality that have not been addressed. Intersectionality, a robust theoretical lens, considers how multiple forms of marginality contribute to lived experiences (Moradi & Grzanka, 2017). Additionally, Tarshis and Baird (2021) and Gundle (2015) identified the need for increased focus on supervisees by their supervisors and provided an example of how supervisors who work with victims of trauma can incur vicarious trauma.



## Literature Review

### Parallel Processing

There are varying definitions of the phenomenon of parallel processing in clinical supervision. Zetzer et al. (2020), Sarnat (2020), and St. Arnaud (2017) cited Searles (1955) as initially dubbing the phenomenon as a reflection process. Searles (2015) later defined the phenomenon as a function of the relationship with the client, which the supervisee re-enacts in the clinical supervisory relationship. However, there is agreement that the phenomenon initiates with the supervisee. The client's dynamics are present in supervision through the transference reactions from the supervisee toward the supervisor (St. Arnaud, 2017; Tracey et al. (2012).

### *Attributes of the Phenomenon*

Searles (1955) identified the phenomenon of parallel processing more than 60 years ago. However, researchers have concluded the potential of this phenomenon is still in the developmental stages (Tracey et al., 2012; Watkins, 2015; Watkins, 2017). The inability to capture the phenomenon is understandable as there is limited evidence of its existence beyond reports, examples, and anecdotes (Sarnat, 2019; Watkins, 2017; Zetzer et al., 2020). The lack of tangible evidence can foster skepticism about its existence or potential as a practical supervisory resource. However, with more clinical supervisors expressing a willingness to embrace the phenomenon, the phenomenon's potential could be realized (Sarnat, 2019; Watkins, 2017).

According to Watkins (2015b), the clinical supervisor's use of the phenomenon of parallel processing has become a common factor in the approach to clinical supervision

regardless of the supervision model. The supervisee initiates the experience in the supervision relationship (Watkins, 2017). There is a re-enactment of the interpersonal interactions in the supervision dyad that occurred in the therapeutic environment. Due to a lack of awareness, the supervisee may not demonstrate the identity of a professional counselor while processing the specific case with the supervisor. The supervisee does not display an understanding of their re-enactment. The supervisory relationship can be a platform to assist the supervisee in attaining clarity. Martin (1987) as cited in Sarnat (2019) stated that the best supervisory dyad occurs when the phenomenon is identified and addressed during that supervision session.

A key attribute of the phenomenon of parallel processing is when the behavioral pattern displayed in the therapeutic environment is re-enacted in the supervision environment. During the behavioral display, the relationship between the supervisor and the supervisee can provide a means to deepen the supervisory work. The clinical supervisor could add an experiential component without losing focus on the client or the supervisee's professional development (Sarnat, 2019; Searles, 2015; Taylor et al., 2012). Gomez (2020) stated that collaboration between the supervisor and supervisee could develop a supervision process that fosters professional growth while meeting the needs of a diverse profession and society.

The phenomenon of parallel processing can provide a resource for the clinical supervisor to utilize their therapeutic mentoring skills. Sarnat (2019) and Zetzer (2020) stated that the phenomenon of parallel processing could enrich supervision as there is the opportunity for the supervisee and the supervisor to share experiences which can

facilitate a deeper relationship. Multiple approaches, such as role-playing or Socratic questioning, can be used to address the phenomenon of parallel processing (Sarnat, 2019).

### ***Researcher Approaches to Parallel Processing***

St. Arnaud (2017) investigated the clinical utility of the phenomenon by exploring case studies and concluded that the supervisee's difficulties or wounds might appear while in supervision. Effectual supervision aims to aid the supervisee in their personal and professional development (Sarnat, 2019; St. Arnaud, 2017). Alternatively, Zetzer et al. (2020) and Watkins (2017) focused on the supervisor's perspective of the phenomenon. The researchers documented thoughts provided by supervisors highlighting how the phenomenon is active from the client up to the supervisor and the supervisor's reaction, identified as "top-down" to the client with the supervisee as the conduit. According to Zetzer et al. (2020), the study results informed the development of better research questions about the emotional and behavioral patterns that flow up and down the supervisory triad. The researchers provided limited demographic information on the supervisees. In fact, the researchers noted a limitation of the study was a lack of racial and ethnic diversity (Zetzer et al., 2020). The limitation of the study was addressed in this study.

Watkins (2017) further explored how to apprehend the concept but cautioned against defining every supervisee re-enactment as the phenomenon of parallel processing. As he explored the history of the phenomenon, Watkins (2017) stated the concept of parallel processing was initially emphasized as originating as a bottom-up action

originating with the client. Although the author offered multiple perspectives of what causes the phenomenon of parallel processing such as experiential, intrapsychic, historical, interpersonal, or epidemiological, Watkins (2017) acknowledged these perspectives are viable approaches to seeing and apprehending the concept of parallel processing. In fact, Watkins (2017) stated what is perceived as the phenomenon of parallel processing could be the supervisee's interfering personality feature on display in both treatment and supervision. Yet, Watkins (2017) does acknowledge that when multicultural diversity is ignored during the phenomenon of parallel processing, supervisors miss the opportunity to identify and reduce biased practices.

Sarnat (2019) and Watkins (2017) explored the phenomenon's history, which was initially associated with psychoanalytic supervision. The researchers traced the evolution of the parallel processing phenomenon. Sarnat (2019) used vignettes to explore parallel processing in counselor supervision, while Watkins (2017) identified this approach as a limitation to justify the phenomenon. However, Sarnat (2019) concluded that if the supervisor and supervisee can theorize what has gone on between them during the supervision process, it helps a supervisee to link up abstract conceptualization to lived experience, an essential component of effective psychotherapy training. Watkins (2017) acknowledged there are instances in supervision that the phenomenon appears, but also identified the need to study the phenomenon from a multicultural perspective.

The conclusions in each article supported the presence and a critical analysis of the phenomenon of parallel processing. The supervisee's professional development and identity are focal areas of clinical supervision. There are diverse techniques used in the

process of clinical supervision (Bernard & Goodyear, 2019). This study focuses on the impact of the phenomenon of parallel processing as one of those techniques.

### **Clinical Supervision**

Clinical supervision is the cornerstone of professional development for the supervisee (Bernard & Goodyear, 2019; Peters, 2017; Phillips et al., 2017, Sarnat, 2019). Clinical supervision is a formal relationship that characterizes the preparation of the mental health professional for independent practice (Bernard & Goodyear, 2019; Simpson-Southward et al. 2018) wherein a more experienced member of a profession provides oversight and guidance to a junior member of the same domain to help the supervisee become a well-rounded practitioner. According to Peters (2017), clinical supervision has been acknowledged as a space for building the supervisee's competencies and abilities. The mental health counseling profession requires clinical supervision as a part of the supervisee's development and progress toward independent and licensed practice (Teixeira, 2017). Clinical supervision aims to provide a platform for the supervisee to become a competent, effective, and ethical practitioner (Association of Counselor Education and Supervision (2011). Clinical supervision is also a medium used to enhance function, and there are required aspects of evaluation and gatekeeping (Southward et al., 2018).

The supervision domain incorporates responsibilities from the teaching, consulting, and clinical fields of counselor education and supervision. Supervisors serve as trainers, mentors, and clinicians. Clinical supervisors collaborate with the supervisee to develop their professional identity and skills as professional counselors (Pelling et al.,

2017). Pelling et al. (2017) further elaborated on clinical supervision by stating that professionals are held to ethical standards by the public and professionals. The community expects professionals to be trained to superior standards and responsibly conduct themselves.

Dennis and Aitken (2019) stated that supervision is an opportunity to attend to any pre-existing belief system. This system impacts the way we, as humans, relate and behave toward ourselves and others. The supervision process affects the supervisor, the supervisee, and the client (Tracey et al., 2012). Clinical supervision is the cornerstone of professional development for the supervisee (Bernard & Goodyear, 2019; Peters, 2017; Phillips et al., 2017; Sarnat, 2019).

### ***Process of Clinical Supervision***

The responsibility of the clinical supervisor is to provide guidance and training (CACREP 2016). Section F of the American Counseling Association (ACA) *Code of Ethics* (2014) stipulates guidelines for the supervision process. Evaluation is at the core of clinical supervision (Bernard & Goodyear, 2019; Teixeira, 2017). The process consists of meeting with the supervisee on a designated frequency, usually at least one hour per week. The supervisor builds relationships during the supervision meetings and provides professional guidance (Peters, 2017; Sarnat, 2019). In building the relationship and giving direction, the clinical supervisor stimulates and challenges the supervisee. The supervisor may choose structured or unstructured interventions based on the supervisee's developmental level and needs (Bernard & Goodyear, 2019).

Structured interventions allow the supervisor to direct the session. The structured interventions may include sitting in the session with the supervisee, reviewing recording sessions during supervision, and providing immediate feedback (Bernard & Goodyear, 2019). The supervisor may also use unstructured interventions once the supervisee demonstrates appropriate autonomy in the therapeutic environment. Unstructured interventions may include pre- or post-session debriefing, reviewing the session notes, and providing feedback (Bernard & Goodyear, 2019). The supervision process results in the supervisee's ability to examine their professional decisions and gain confidence during their professional development (Bernard & Goodyear, 2019; Pelling et al., 2017). Each supervisor uses a self-identified model of supervision to accomplish these tasks.

### ***Models of Supervision***

The clinical supervision models fall into four categories: psychotherapy-based, developmental, process, and second-generation (Bernard & Goodyear, 2019). Cruikshank and Barden (2017) stated that although there are numerous models of clinical supervision, there is little supportive evidence that indicates one model is superior. Psychotherapy-based supervision models include Psychodynamic, Cognitive-Behavioral Supervision, Humanistic, and other theory-based approaches (Bernard & Goodyear, 2019; Thomas, 2010).

**Psychodynamic Supervision.** Psychodynamic supervision focuses on the dynamics of the supervisee (Bernard & Goodyear, 2019). As the psychodynamic supervision model has evolved, the framework incorporates relational and multicultural dynamics (Bernard & Goodyear, 2019; Sarnat, 2016). There are three dimensions

highlighted in this supervision model: the supervisor's authority in the relationship to the supervisee, the supervisor's focus, and the supervisor's mode of participation (Bernard & Goodyear, 2019). These dimensions contradict the premise that the dynamics are focused on the supervisee. However, each dimension highlights the need for the supervisor to be self-reflective (Bernard & Goodyear, 2019; Sarnat, 2016). The supervisor--supervisee relationship is on a continuum or gradient.

**Humanistic Relationship Oriented Supervision.** The humanistic-relationship-oriented supervision model is grounded in Rogerian therapy (Bernard & Goodyear, 2019). The supervisor models the person-centered approach in the supervision environment (Krug & Schneider, 2016). This supervision model focuses on helping supervisees expand their knowledge of theory and technique, their capacity for self-exploration, and their skill in using self as a change agent (Farber, 2010, 2012, 2014). Further, Krug and Schneider (2016) stated that by exploring the supervisee's perception of the clients and themselves, they will learn the value of presence, acceptance, empathy, and compassion.

**Cognitive–Behavioral Supervision.** A list of propositions guides this model's supervision process (Thomas, 2010). Cognitive–Behavioral supervisors are specific and systematic in their presentation of the goals and strategies of supervision (Cummings et al., 2015; Pretorius, 2006; Waltman, 2016). The supervision session includes setting an agenda and prioritizing the items on the agenda. Holbert and Wootton (2016) pointed out the importance of assisting the supervisee in correcting dysfunctional thinking that affects



emotions and behaviors as the primary goal of CBT supervision. The supervisor's intention in doing so must be clear to the supervisee.

**Systemic Supervision.** Systemic therapy is synonymous with family therapy. Celano et al. (2010) described the components of systemic supervision as developing the skills necessary to work within a family system. The supervisor assists the supervisee in applying evidence-based family therapy models and addressing the supervisee's family of origin by using parallel processing (Celano et al., 2010). Jordan and Blount (2016) stated the seven phases of systemic supervision include co-constructing a safe supervision environment, co-constructing foundational and evolving contracts, forming and building the supervisory alliance, providing formative and summative evaluation, and collaborating on future considerations.

**Feminist Therapy Supervision.** Feminist therapy supervision follows feminist therapy in the concepts of "emphasizing the social context, championing diversity, examining the social construction of gender, promoting social justice, as well as engaging in both reflexivity and professional development" (MacKinnon et. al., 2011, p. 131). Porter (1995, 2009) defined a four-stage feminist supervision model. This supervision model includes steering the supervisee to explore a client's identified problem to gain expert knowledge to address the issue. The supervisor then explores the supervisee's biases and misconceptions. The supervisor attends to any countertransference manifested in therapy and biases manifested in supervision. The supervisor explores community engagement and interventions at a societal level that could promote client well-being and serve to increase the supervisee's understanding of social action.

Because of its sensitivity to power differentials, a hallmark of feminist therapy supervision is a collaboration between the supervisor and the supervisee. The supervisor--supervisee relationship is one of respect where communication is honest, includes an analysis of power, and does not deny the supervisor's gatekeeping role.

**Postmodern/Constructivist Supervision.** The supervisor employs a consultant role in this supervision model. The supervisor's focus is to maintain equality between participants. This supervision model focuses on the supervisee's strengths and cultural lens (Bernard & Goodyear, 2019). The supervisor incorporates reflective activities to assist supervisees in finding their answers and an assessment process that emphasizes self- and supervisor assessment (Guiffrida, 2015a, 2015b; Rogers & Miranda, 2016; Unger, 2006).

**Narrative Supervision.** Although clients generally have a developed story of self that they seek to modify, supervisees are just beginning to create their own stories of self as professionals. The supervisor's role is to assist the supervisee in editing clients' stories and helping them develop their own professional stories. Supervisors, therefore, must substitute a stance of knowing with a perspective of curiosity. Whiting (2007) stated that this posture of curiosity requires the supervisor to forfeit their expert status. Although this might be a challenge for some supervisors, supervisors who adhere to narrative therapy are more likely to collaborate (Gale, Ross, & McCoy, 2016; Shurts, 2015). Novice supervisees may become frustrated with the expectation that they will co-construct their narratives as counselors.

**Solution-Focused Supervision.** According to Bernard and Goodyear (2019), the solution-focused supervision model follows the concepts of the therapeutic model. Hsu (2009) identified seven components of the Solution-Focused Supervision model. The components include a positive opening followed by a problem description, identifying positive supervision goals, exploring exceptions for both supervisees and clients, developing other possibilities by discussing hypothetical situations with the supervisee as well as considering the embedded meaning in the supervisee's worries about worst-case scenarios, giving feedback and clinical education, assisting the supervisee in forming the first step for their upcoming counseling session, and following up in subsequent supervision sessions about changes that occurred for both the client and the supervisee based on solution-focused techniques and philosophy (Bernard & Goodyear, 2019; Hsu, 2009). The supervisor uses a consultant role and gives particular attention to language usage (Shurts, 2015).

**Integrative Supervision.** Integrative supervision is a psychotherapy-based model. The primary focus is the mentoring of the supervisee toward competence in a flexible theoretical context. Supervision must include oversight of the implications of integrating concepts or techniques from another theoretical perspective and the compatibility of such to the original conceptualization. Integrative supervisors spend more time with their supervisees discussing theory than those who choose to supervise within one theoretical orientation (Bernard & Goodyear, 2019).

### ***Developmental Models of Supervision***

According to Bernard and Goodyear (2019), the developmental models of supervision include reflective developmental models, IDM, SCDS, and Loganbill, Hardy & Delworth. In fact, developmental models draw on different theories such as psychosocial developmental, Eriksonian, and cognitive learning theories (Bernard & Goodyear, 2019). The clinical supervisor implements the model based on the needs of the supervisee.

**Integrated Developmental Model.** The Integrated Developmental Model (IDM) focuses on meeting the supervisee at their level of development (Callifronas, 2022; Bernard & Goodyear, 2019). The IDM is the best known and most widely used stage developmental supervision model (Bernard & Goodyear, 2019). The IDM is descriptive concerning the supervisee's processes; it is prescriptive for the supervisor's interventions (Stoltenberg & McNeill, 2010). In the developmental model described by Skavholt and Ronnestadt (1995), the focus is on the supervisee's developmental stage from a phase perspective. However, implementation is linear in this model versus the IDM (Callifronas, 2022).

**Systemic Cognitive–Developmental Supervision.** Rigazio-DiGilio extended the earlier work of Ivey (1986) to develop a supervision model that encourages supervisors to track and intervene with supervisees based on the cognitive style of the supervisee (Rigazio-DiGilio, 1997; Rigazio-DiGilio & Anderson, 1995; Rigazio-DiGilio, Daniels, & Ivey, 1997). The model encompasses four cognitive orientations, and each has its advantages and disadvantages for conducting therapy. The supervisor's task is to identify

the primary orientation of each supervisee; assist the supervisee in the appropriate application of the cognitive orientations (Redd, 2016). The four cognitive orientations are sensorimotor, concrete, formal, and dialectic. When supervisees can access these constructs, they can shift gears during therapy and offer assistance that is more likely to be on target. The SCDS model assesses the supervisees' way of experiencing and conceptualizing their work (Bernard & Goodyear, 2019).

Loganbill et al. (1982) chose eight developmental tasks of youth lifespan development. The authors redefined the tasks into professional issues for those training to be therapists. The responsibilities include competence, emotional awareness, autonomy, professional identity, respect for individual differences, purpose, the direction of personal motivation, and professional ethics. The trainee might be at one of three stages for each issue—stagnation, confusion, integration, or transition between stages.

### ***Process Models***

The process models of supervision include the discrimination model and critical events in supervision model Hawkins and Shohet, and system approach to supervision model.

**Discrimination Model.** The discrimination model assists new clinical supervisors with cognitive discrimination among the various choices of how to interact with their supervisees (Bernard & Goodyear, 2019). The discrimination model provides language to describe supervision that is helpful for the supervisor and the supervisee. This model focuses on intervention, conceptualization, and personalization. Bernard and Goodyear

(2019) highlighted common interaction sequences in the task environments of critical events.

**Critical Events in Supervision Model (CESM).** This supervision model focuses on task analysis versus the reflective process of the developmental models of supervision. An event has an identifiable beginning, middle, and end and occurs within a particular session; it can also extend across sessions. The CESM allows the supervisor to identify the struggles of the supervisee and the vast possibilities for intervention (Bernard & Goodyear, 2019).

**Hawkins and Shohet Model.** The HSM supervision model has a double-matrix model that reflects two primary ways the supervisor may focus (Callifronas, 2022; Bernard & Goodyear, 2019). Callifronas (2022) stated that the second matrix combines focus-oriented and person-centered supervision. The primary focus for the supervisor is to pay attention to the supervisee-client matrix, and the second is to attend to this matrix through the supervisee-supervisor matrix using immediacy techniques.

**System Approach to Supervision Model.** The SAS supervision model consists of seven interconnecting dimensions that provide a map to aid the supervisor in navigating supervision. This model intends to help supervisors ask the right questions when issues arise rather than dictate. The core dimension is the supervision relationship; all other features follow that connection.

### ***Second-Generation Models of Supervision***

The second-generation supervision models include three types: combined models, target issue models, and common factors models. The collective models merge two

established models from the same category or across two groups. Target issue models focus on essential issues such as multicultural expertise. They may or may not infuse an existing model from a primary category based on the client's needs. Still, they reflect constructs from at least one of the three primary categories. The common factors model provides insight into supervision in general and enriches all other supervision models by highlighting common elements (Bernard & Goodyear, 2019).

Zetzer et al. (2020) and Thacker and Diambra (2019) conducted qualitative studies using case study designs to explore the phenomenon of parallel processing. Zetzer et al. (2020) focused on the perspective of the clinical supervisor to explore how they identified and responded to the phenomenon of parallel processing in clinical supervision. The study results found evidence for an eight-step pattern that occurred across clients, therapists, and supervisors. According to Zetzer et al. (2020), the supervisee is triggered by an event in the counseling session. The event hooks the supervisee and re-enacts the clients' behavior in supervision. The re-enactment captured the supervisor. The supervisor reflected on their reactions and intervened, which led to positive and neutral outcomes.

Thacker and Diambra (2019) provided qualitative research using case studies to explore the professional identity development of supervisees during clinical supervision. The researchers highlighted how the professional identity of a supervisee is cultivated in clinical supervision through the phenomenon of parallel processing.

Clinical supervision requires the supervisor to engage from multiple perspectives to adequately meet the needs of a supervisee and the client (Stoltenberg & McNeil,

2009). The supervisor should consider the diversity of the supervisee. The supervisor can employ a model of supervision that provides a space for fostering the supervisee's competencies, skills, and professional identity (Peters, 2017; Stoltenberg & McNeil, 2009). The ACA Code of Ethics (2014) states that supervisors have a professional and ethical responsibility to meet the supervisee's needs and protect the clients.

Supervision of the supervisee occurs at multiple intervals throughout the journey toward professional practice. Clinical supervision is required to graduate from CACREP counseling programs and become a licensed professional counselor (CACREP, 2016; Cruikshanks & Burns, 2017). According to Bernard and Goodyear (2019), supervision models provide a conceptual framework; however, as supervision's specialty has evolved, no one model successfully addresses all the societal and professional contexts that a supervisee needs.

### **Diversity/Multiculturalism**

The terms *diversity* and *multiculturalism* are sometimes used interchangeably in the literature. Wilson (2014) stated that diversity means variety. However, multiculturalism is a concept related to diversity that describes approaches to the diversity of cultures in society (Remley & Herlihy, 2020). According to Wilson (2014), culture can encompass different things for different people; however, it is more than an individual's skin color. Culture encompasses nationality, ethnicity, geographic area, gender, socioeconomic class, education level, religion, age, generation, physical ability, industry type, organizational, and professional differences (Distelhorst, 2007).



### ***Studies Related to the Concept of Diversity/Multiculturalism***

Zetzer (2015) discussed how the two concepts, multiculturalism and the phenomenon of parallel processing, could be a resource and a liability through case examples. The author discussed how the supervisors' use of microaggressions could affect the supervisee. Microaggressions are snubs that could communicate negative messages to the supervisee (Lewis & Neville, 2015). Microaggressions delivered by individuals are sometimes oblivious to the impact of their behavior. There are two suggested approaches to avoid using microaggressions. A multicultural supervision model or the Ancis and Ladany's Heuristic Model of Non-oppressive Interpersonal Development (2010) would demonstrate sensitivity to the supervisee's membership in a socially privileged or socially oppressed group affects their worldview (Zetzer, 2020).

Phillips et al. (2017) examined the relationship between the perceived depth of discussion of multicultural identities in clinical supervision. The study supported the need for in-depth discussions of diverse identities in the supervisory dyad as an effective supervisory behavior associated with positive outcomes in clinical supervision. The survey research results concluded that discussing diverse identities in the supervisory dyad is associated with stronger supervisory working alliances and decreased role conflict and role ambiguity.

Although multicultural complexity and intersectionality transcend supervision, the clinical supervisor has an ethical and professional responsibility to incorporate multicultural awareness into the supervision process (ACA, 2014; Chan et. al., 2017; Peters, 2017; Phillips, 2017; Zetzer, 2015; Zetzer, et. al., 2020). While Peters (2017)

focused his discussion on training the supervisee, Chan et al. (2017) discussed multiculturalism and intersectionality from supervision and pedagogy perspectives. Peters (2017) introduced the concept of multicultural complexity. Multicultural complexity refers to the intricacies and complexities represented by the intersection of multiple grounds of identity privilege and marginalization. Chan et al. (2017) and Peters (2017) further stated that these attributes of multicultural complexity define social, historical, and political dimensions for different populations and communities.

Thompson and Bridges (2019) used a heuristic research design to explore the lived experiences of CES faculty and how intersectionality influenced their pedagogy. Thompson (2018) stated that as counselor educators prepare future counselors, supervisors, and educators, they must do so with a pedagogical lens that facilitates understanding by acknowledging oppressed and privileged identities. CES faculty are suited to demonstrate the areas of change needed to include intersectionality as pedagogy (Thompson & Bridges, 2019). Pugach et al. (2019) provided a literature review focusing on research examining social justice and teachers' preparation for diversity and equity in the classroom. The findings indicated that identity is unidimensional, with little acknowledgment of the students' or teacher candidates' intersectionality.

### **Summary and Conclusions**

A major theme in the literature is that clinical supervision is a key platform to prepare future counselors for alignment with this mission. There are multiple models of supervision; however, the complexity and needs of the supervisee require that the supervisor consider the intersectionality of the supervisee. If not addressed in clinical

supervision, supervisors can present with unresolved personal issues and experience transference reactions that hinder their growth as professional counselors (St. Arnaud, 2017). According to Remley and Herlihy (2020), minority groups share distinctive cultural and physical characteristics that distinguish them from the dominant group. As a result, the minority supervisee may experience complex transference reactions. The data obtained from this study may fill that gap. In Chapter 3, I outline the methodology and a detailed description of the proposed research design.

## Chapter 3: Research Method

### **Introduction**

The purpose of this study was to explore the lived experiences of minority supervisees as they describe the phenomenon of parallel processing during clinical supervision. This chapter includes the research design and rationale, role of the researcher, methodology, participant selection logic, instrumentation, procedures for recruitment participation and data collection, and the data analysis plan. This chapter also covers issues of trustworthiness, which include credibility, transferability, dependability, confirmability, and reliability, and ethical procedures.

### **Research Design and Rationale**

The research question for this study is: What are the lived experiences of minority supervisees during the parallel process phenomenon in counseling supervision? The term *minority* is operationalized as the intersectionality of the individual supervisee. The central concept of this study was the lived experiences of minority supervisees. The qualitative method refers to investigative research and is generally used to understand the views and perceptions of a targeted population. Kalman (2019) stated that qualitative research is an emergent, inductive, interpretive, and naturalistic approach to studying people, cases, phenomena, social situations, and processes in their natural settings. A qualitative researcher can use various practices for data collection, such as group discussions, individual discussions, individual interviews, diary and journal exercises, and the participation of the population chosen to study (Hammarberg et al., 2016; Rubin & Rubin, 2012). Ravitch and Carl (2019) stated that qualitative research involves

viewing, understanding, and engaging with people. There is no goal of finding an objective or answer in qualitative research (Ravitch & Carl, 2019).

I focused on Heidegger's hermeneutic phenomenology in this study (Smith et al., 2009). The focus is on what Heidegger (1962) termed as *dasein* or *being with*. Heidegger's philosophy or hermeneutics stated that there is no way to separate the self from experiences and attempting to do so hinders the ability to get to a phenomenon's essence (Heidegger, 1962; Peoples, 2020; van Manen, 1997). According to Peoples (2020), a hermeneutic circle describes the process of understanding; understanding and interpretation are active constructs of hermeneutic phenomenology.

I used IPA to analyze the data. Smith et al. (2009) defined IPA as a qualitative research approach founded on the theoretical underpinnings of phenomenology, hermeneutics, and ideography. Alase (2017) stated that IPA provides a researcher with the best opportunity to understand the reflection of participants' lived experiences. Smith et al. (2009) indicated that IPA researchers believe human beings are sense-making creatures. A researcher's data analysis using this framework reflects participants' attempts to make sense of their experiences. Smith (2017) stated that IPA researchers should collect data from a purposive, homogeneous sample and use in-depth semistructured interviews.

The hermeneutic circle resonates with IPA and the hermeneutic theory. The circle is focused on the parts as much as it focuses overall (Smith et al., 2009). An analogy would be to consider the circle as a puzzle in the process of interpretation. The analysis is performed from a nonlinear style of thinking, or iterative, moving back and forth as the

researcher's relationship to the data shifts as the meaning of a sentence becomes apparent when seen in the context of cumulative meanings of the individual words (Smith et al., 2009).

According to Smith et al. (2009), IPA researchers can take from Heidegger that the world is always perspective, temporal, and about something. The interpretation of people's meaning-making activities is at the center of phenomenological inquiry in psychology. Phenomenological research is a design of investigation derived from philosophy and psychology. In this study, I described the lived experiences of individuals regarding the phenomenon of parallel processing as described by participants (see Creswell & Creswell, 2018). Smith et al. (2009) stated that in the context of IPA research, the interpretative analyst can offer a perspective on a participant's text that the participant may not have seen. The interpretative analyst accomplishes this through systematic and detailed analysis (Smith et al., 2009).

### **Role of the Researcher**

According to Golafshani (2003) and Ravitch and Carl (2019), the researcher is the primary instrument in qualitative research. As the researcher in this study, I am both an insider and an outsider; I am a practitioner and a clinical supervisor. I am currently teaching master's level students, but I am also a doctoral student. I also meet the criteria for minority as I am a Black woman. In accordance with van Manen (1997) and Smith et al. (2009), as the researcher, I explored, analyzed, and interpreted the data to a recognizable meaning.

## Methodology

### Participant Selection Logic

The population for this study was minority counseling supervisees. Robinson (2014) outlined a four-point approach to sampling: (a) setting a sample universe, (b) selecting a sample size, (c) devising a sample strategy, and (d) using a sample source in research that employs interviewing as data collection. According to Korstjens and Moser (2018), sampling strategies should yield rich information and be consistent with the chosen methodological approach. The term *minority* is a group membership that can make a person vulnerable to various forms of bias (Gillborn, 2015; Kelly et al., 2021; Warner et al., 2020). Although each participant may represent a different minority population, the population sample collectively represented the definition of minority outlined in Chapter 1. The population sample for this study consisted of a homogenous group, aligning with the IPA approach (Robinson, 2014).

Homogeneous samples align with the philosophical foundations and analytical processes of IPA (Robinson, 2014; Smith et al., 2009). I conducted a 60-minute in-depth one-on-one interview with each of the six participants. The participant range provided enough data to achieve saturation (Guest, n.d.). The idiographic approach is defined as a small sample size that aligns with IPA's theoretical components (Smith et al., 2009). According to Smith et al. (2009), the plan for IPA interviews is to set up the interview as an event that facilitates the discussion of the relevant topic and allows a researcher to explore the phenomenon through analysis. Korstjens and Moser (2018) defined purposive

sampling as the method for selecting participants based on judgment about what potential participants would be the most informative.

The homogeneity of the population sample provided the opportunity to gather relevant data and align with the IPA philosophy (Robinson, 2014). IPA is explicit regarding the need for homogenous samples. This population sample works best in conjunction with the philosophical foundations and analytical processes (Smith et al., 2009). According to Robinson (2014), IPA studies remain contextualized by a researcher maintaining cautious generalization to the localized population sample. Therefore, I used purposive and snowball sampling to recruit participants from social media sites and the Walden University research participant pool. The use of snowball sampling allowed me to select other participants through referrals by previously selected participants (see Korstjens & Moser, 2018).

I collected data from six participants who met the criteria of being a minority supervisee from the perspective of intersectionality based on their responses during the interview. Ravitch and Carl (2019) stated that because it is not the goal of purposive sampling to generalize, the sample size is not important. In this study, participants provided data regarding their lived experiences during supervision encounters. Participants gave information from their personal experiences of the phenomenon of the parallel process through interviews where I relied on a semistructured interview protocol (see Appendix B).



## **Instrumentation**

The data collection instruments for this study were the researcher, Zoom video teleconferencing platform, and an in-depth interview protocol (see Appendix B). I used a short demographic questionnaire to ensure participants met the inclusion criteria and to establish triangulation of data. This questionnaire was completed in advance of the interview via email (Appendix A). Korstjens and Moser (2018) stated that one of the most frequently used data collections in qualitative research is face-to-face, telephone, or online interviews. I conducted online virtual interviews in a one-on-one session to elicit participants' experiences, perceptions, thoughts, and feelings. I audio-recorded the interviews.

## **Procedures for Recruitment Participation and Data Collection**

Korstjens and Moser (2018) stated that in phenomenological research, a researcher uses purposive sampling. Participants meet defined criteria, with the most prominent criteria being participants' experiences. In this study, I recruited participants using a flyer (Appendix C) posted on the listserv maintained for counselor educators and supervisors, CESNET-L, social media sites such as Facebook and LinkedIn, the Walden University research participant pool, and the Virginia Department of Behavioral Health Community Services Board which is comprised of multiple local offices throughout the commonwealth of Virginia.

For data collection, the best approach involves an event such as interviewing that elicits detailed stories, thoughts, and feelings from the participant (Smith et al., 2009). The focus of the interviews was to facilitate a comfortable interaction that permitted

participants to provide a detailed account of their experience with the phenomenon of parallel processing (Smith et al., 2009). I conducted 60-minute semistructured interviews with each participant. In accordance with Ravitch and Clark (2019), I engaged in member checking for 30 minutes with each participant as needed after transcripts of their recorded session were completed. I observed their psychological processes during the phenomenon through verbalization (see Smith et al., 2009).

I used an iterative process using a hermeneutic phenomenology framework for the research study. The process involved an engrossing dialogue during the interviews, repetitive reading of the transcripts, and multiple rounds of coding to flush out the themes (Peoples, 2020; Smythe et al., 2007). The process was visible as I transcribed and coded the interviews. I questioned and trusted participants' understanding that emerged without expecting answers that could be declared unquestionable.

The availability of each participant determined the date and time of the interview. Alase (2017) stated that the first choice and preference should always be at the participants' place of comfort. Given the COVID-19 pandemic and safety protocols, the time of the interview was the participants' choice.

According to Smith et al. (2009), developing a schedule for the semistructured interviews will enable the participant to provide a detailed account of the lived experience. Therefore, I used the following steps in the development of the interview protocol:

1. I identified the broad area I hoped to hear about, which was the encounter with the supervisor and the events that led up to the re-enactment of the client behaviors during the supervision meeting.
2. I encouraged participants to verbalize their supervision experience.
3. I used curiosity to explore the meaning participants attributed to the supervision process and used their feedback to invite participants to tell me about their thoughts, feelings, sensations, etc., as they initiated the phenomenon of parallel processing.
4. I asked open questions related to the supervision process, the behaviors they were processing with the supervisor, and an inquiry into how the process affected them and their approach to working with clients.
5. I discussed my list of questions with my dissertation chair.
6. The exit strategy included a meaningful dialogue to identify the end of the participant–researcher relationship. An Amazon gift card was provided to each participant.

### **Data Analysis Plan**

I used IPA as the data analysis plan because of its consistency with the epistemology of the research question (Smith et al., 2009). IPA required me to identify and understand two related aspects of the participant’s account, which include the objects of concern in the participant’s world (their cultural and community identity while engaged in the phenomenon of parallel processing, and the experiential claims made by

the participants to develop a phenomenological account. I focused on grasping the meaning of the phenomenon for the minority supervisee.

Smith et al. (2009) stated that IPA is an iterative and indicative cycle that follows a multi-step process that includes reading and re-reading, initial noting, developing emergent themes, moving to the next case, and then looking for patterns across cases.

Therefore, I followed the steps outlined by Smith et al. (2009). These included:

1. Reading, and re-reading to make the participant's comments the focus of the analysis. After the semi-structured interviews, Smith et al. (2009) recommended reading the transcript in short periods to slow down the habit of haphazard reduction and synopsis. I read and re-read while listening to the recordings to immerse myself into the participant's world.
2. I began the initial noting. Smith et al. (2009) stated that the initial level of analysis is the most detailed and time-consuming as the initial level of analysis examines semantics and language use on an exploratory level. This process ensures a familiarity with the transcript and, I began to identify ways that the participants talked about and understood the issue. I merged these two steps to make descriptive, linguistic, and conceptual notes and comments on the transcript as I read them. Alase (2017) stated that researchers should begin their data coding by reading the interview transcripts several times to understand what the participant is saying and how the subject matter affected their lived experience.
3. I searched for emergent themes by analyzing the exploratory comments. The analysis involved breaking the narrative flow of the interview and represented a

manifestation of the hermeneutic circle. This process involved focusing on small pieces of the transcript while remembering the highlights of Steps 1 and 2 (Smith et al., 2009).

4. I started the process of abstraction, polarization, contextualization, numeration, function, and bringing it together. Alase (2017) stated that this process allows the researcher to extrapolate a few words that will provide the essence of the lived experience.
5. I moved to the next case and repeats steps 1 through 4.
6. I looked for patterns across the cases. I will look for how a theme in one case relates to a different case and the dominant themes. IPA is interpretative. As there are multiple levels of understanding and interpretation, I will consistently confer with my dissertation chairperson to ensure appropriate interpretation and analysis. I applied the process of Step 3 to all cases to develop the research themes (Alase, 2017; Smith et. al., 2009).
7. I stored all data on a password-protected flash drive and stored it in a locked cabinet. To protect the participants' privacy, only this researcher will have access to the information given in the demographic email (Appendix A).

### **Issues of Trustworthiness**

Credibility, transferability, dependability, and confirmability are the criteria to ensure trustworthiness and assess rigor in qualitative research (Anney, 2014; Ravitch & Carl, 2019). Trustworthiness is also referred to as validity in qualitative research.

According to Ravitch and Carl (2019), validity is how I can affirm that my findings are faithful to the participant's experience—it is both a process and a goal.

Data saturation is also a concept that must be considered based on its impact on trustworthiness. A guiding principle in qualitative research is to sample only until data saturation. I accomplished data saturation when the new cases provided redundant information (Guest et al., 2006; Korstjens and Moser, 2018). Congruent with phenomenological research, I recruited six participants, which allowed for data saturation.

### **Credibility**

Multiple strategies ensure that credibility is met, including prolonged engagement, persistent observation, and triangulation (Korstjens & Moser, 2018). In this study, I used prolonged engagement comprised of intentional presence in the semi-structured interview. The in-depth, semi-structured interview lasted approximately 60 minutes and allowed me to become familiar with the setting and context of the phenomenon. The process included building rapport with the participants and exploring their responses to get rich data.

According to Patton (2015), the credibility of qualitative inquiry depends on systematic, in-depth fieldwork that yields high-quality data, organized and conscientious analysis of data, the credibility of the researcher, and the audience's philosophical belief in the value of qualitative inquiry. I used triangulation, member checking, and scheduling regular meetings with my dissertation chairperson to meet the criteria of credibility.

**Transferability**

Transferability is going beyond the description and interpreting the context to make the behavior and experience meaningful to the reader (Korstjens and Moser, 2018). According to Ravitch and Carl (2019), transferability is how the study can be applied or transferred to broader contexts while maintaining the richness of the specific context. I used the step-by-step plan of IPA to ensure this criterion was met.

**Dependability**

According to Ravitch and Carl (2019), dependability refers to the stability of the data, and the data is consistent with the focus of the research. The method for achieving dependability included a solid research design incorporating triangulation (Ravitch & Carl, 2019). I used an approach Smith et al. (2009) suggested and explored the phenomenon from multiple perspectives. The approach required that I conduct interviews with participants from community-based, private practice, inpatient, and residential agencies.

**Confirmability**

Confirmability is the equivalent of the quantitative concept of objectivity (Ravitch & Carl, 2019). Confirmability aims to acknowledge and explore how my biases show up in my interpretation of the data to mediate this to the fullest extent through structured reflexivity processes. My strategy to address these criteria included triangulation, participant validation, providing adequate details to gain context on the setting and the participant, and engaging in collaborative dialogue with my dissertation chairperson (Ravitch & Carl, 2019).

### **Ethical Procedures**

Section G.1.c. of the American Counseling Association (ACA) Code of Ethics (2014) states that counselors engaging in research, whether independently or otherwise, are responsible for understanding and adhering to state, federal, agency, or institutional policies regarding confidentiality in their research practices. I have successfully completed the Collaborative Institutional Training Initiative (CITI) required by the Institutional Review Board (IRB) of Walden University. The certificate for this training will be provided with the IRB application.

There are some standard methods for protecting privacy, such as anonymity which protects the confidentiality of the participants' data (Burkholder et al., 2016). In this study, I focused on confidentiality and the protection of privacy of the participants by using pseudonyms. Ravitch and Carl (2019) and Creswell and Poth (2012) stated discussing confidentiality with participants might mean that pseudonyms will be used, or other identifying facts will be changed or not disclosed.

Ravitch and Carl (2019) discussed issues of informed consent. The participants received the Informed Consent prior to their interview as an attachment to an email (Appendix A). Information regarding supportive resources is provided in the Informed Consent and will be reiterated prior to the start of the interview. I conducted the semi-structured interviews in an online environment and only audio recorded the interview. I used the Zoom platform, which offered the highest level of security and encryption. The recorded data was stored on a password-protected flash drive. Upon completion of the



study, the flash drive will be stored in a locked cabinet and maintained for five years per IRB guidelines.

### **Summary**

In this chapter, I have detailed the research design and method for this study. My role as the researcher was defined. The sampling methods and instrumentation tools for the study include me, a welcome email, informed consent, a semi-structured interview, and a flyer which have been explained and are provided in the Appendices. I have described the procedures for recruitment, participation, and data collection. Trustworthiness issues are addressed through the concepts of credibility, transferability, dependability, and confirmability. In Chapter 4, I outline the data collection process and the results.

## Chapter 4: Results

### **Introduction**

The purpose of this study was to explore the experiences of minority supervisees as they engaged in the phenomenon of parallel processing during clinical supervision. The research question was: What are the lived experiences of minority supervisees during the parallel process phenomenon in counseling supervision? In this chapter, I provide the setting and demographics of the participants, the data collection process, data analysis, evidence of trustworthiness, and the results of the study. There were no personal or organizational conditions that influenced the participants or the interpretation of the study results.

### **Setting**

The participant pool was comprised of six minority supervisees. I used video conferencing with the Zoom platform for this study to conduct interviews. I used my private office and locked the door to ensure privacy for each video interview. I used headphones as an additional layer to ensure privacy and audio-recorded the session. Each female participant was in their home environment during the interview session. The male participant was in his office. All the participants were in a quiet, private room, and no other individuals were present throughout the interview.

### **Demographics**

The participants included five women and one man; five were African Americans, and one was Caucasian. One participant was disabled. Each participant was assigned a pseudonym to protect their identity:

- Emma is an African American woman. She identified herself as Christian and heterosexual. She was in her third term of a master-level academic internship. Her supervisor was an African American man.
- Sally is an African American woman. She identified herself as Christian and heterosexual. She was in her second term of a master-level academic internship. Her supervisor was an African American man.
- Ashley is an African American woman. She identified herself as Christian and heterosexual. She was in her second term of a master-level academic internship. Her supervisor was an African American man.
- Leslie is an African American woman. She identified herself as Christian and heterosexual. She was in her second term of a master-level academic internship. Her supervisor was an African American man.
- Nina is an African American woman. She identified herself as Christian and heterosexual. She was in the final term of her master-level academic internship. Her supervisor was an African American man.
- John is a Caucasian man. He denied any religious affiliation. He reported he is a disabled military veteran. His supervisor was an African American woman. John was in his state-required residency for licensure as a professional counselor.

### **Data Collection**

Four participants were solicited from a flyer posted on social media websites, the Walden participant pool, and online at local community service board organizations (see Appendix C). I used snowball sampling to recruit two additional participants. Using the

Zoom platform, I scheduled individual 90-minute semistructured interviews with each participant. While I intended each interview to last approximately 90 minutes, each interview was completed within approximately 60 minutes, as participants were able to provide in-depth information during this time. Each interview was successfully audio recorded as the participants provided data related to their experience of the clinical supervision process and the phenomenon of parallel processing. In accordance with Alase (2017), I encouraged each participant to select a date and time that was convenient for them. I used a semistructured interview protocol to illicit detailed stories, thoughts, and feelings (Smith et al., 2009) as they related to the process of clinical supervision and the phenomenon of parallel processing.

As the phenomenon of parallel processing is outside the conscious awareness of the participant, and in accordance with Zetzer et al. (2020), I used broad questions for the interview protocol to focus participants on the interactions that occurred during clinical supervision. I defined the phenomenon of parallel processing so that participants were aware of the focus of the interview. In addition, I used interviewing techniques including reflection of content and feelings, paraphrasing, curiosity about the verbiage they used to describe their experience, as well as open-ended questions to enable participants to provide details of their experience and to describe the intensity of their feelings.

### **Data Analysis**

In accordance with the data analysis steps outlined by Smith et al. (2009), I listened to each interview after the initial recording and started the transcription and initial coding process to ensure I had thoroughly and clearly explored the experiences of

the participant. After completing all interviews and as a part of the initial coding, I again listened to each recording for approximately 30 minutes to an hour daily as I read through the transcriptions. Simultaneously, I continued the initial coding process and focused on each participant's voice inflections and other nuances to immerse myself in the participant's world. I made notations on the transcriptions throughout the reading process as an additional approach to examining the semantics and language use of the participant.

I used Microsoft Excel to construct a table as an approach to merge the first two steps in a comprehensible manner as I organized memos written after each interview as well as my descriptive and exploratory notes. I provided a definition and explanation to support the coding process and followed with a statement from the participant as an additional condition of support. As the interpretation stage developed, I divided the individual interviews into discrete parts that focused on the clinical supervision process and the phenomenon of parallel processing. I could see accounts of how the intersectionality of the participants influenced their perception of coming into the counseling profession, the clinical supervision process, and the phenomenon of parallel processing.

I transitioned from the analysis phase to the interpretation phase and began Step 3 of the data interpretation by going through the transcript and extracting portions of participants' responses that resonated in verbiage and tone with the theoretical and conceptual foundations of this study. I created a column to document an explanation of why each portion of the transcript was important. Although each participant's experience was unique, all the participants' responses represented shared themes and, as advised by

Guest et al. (2006), led me to feel secure that I had reached saturation with six participants.

### **Evidence of Trustworthiness**

Evidence of trustworthiness is inclusive of credibility, transferability, dependability, and confirmability. To ensure and demonstrate credibility, as Smith et al. (2009) and Korstjen and Moser (2018) suggested, I used semistructured interviews to facilitate prolonged engagement as I built rapport and explored the participants' experiences. I used open-ended questions and curiosity to explore participants' thought processes and to become familiar with their supervision settings and the context of the phenomenon. Each in-depth, semistructured interview lasted approximately 60 minutes for each participant, as this was sufficient to provide prolonged engagement and persistent observation while the participant relieved the experience.

To address transferability, I used the IPA step-by-step process defined by Smith et al. (2009). I also attempted to recruit a diverse representation of intersectionality in the participant sample inclusive of race, gender, religion, disability status, and sexual orientation. As suggested by Ravitch and Carl (2019), the codes that were developed and the themes that emerged were broad enough to be applied to a broader context of the clinical supervision process.

The questions used to gather the data were consistent with the approach proposed by Smith et al. (2009) to ensure dependability as I explored the phenomenon from multiple perspectives. This included exploration of their behaviors, feelings, and thoughts as the phenomenon was discussed. I accomplished this by selecting participants who

worked in various settings such as private practice, community-based agencies, and residential settings.

I implemented the strategies of triangulation and participant validation to ensure confirmability and dependability. Prior to the interview but after receiving consent from each participant, I used a demographic questionnaire to ensure the participant met the inclusion criteria and to establish triangulation of data. As indicated by Ravitch and Carl (2019), I maintained research memos to provide adequate details to gain context on the setting and the participant and engaged in collaborative dialogue with my dissertation committee chairperson.

## **Results**

I developed codes that were a part of the organization process to describe and interpret the meanings as they emerged (Peoples, 2020; van Manen & Adams, 2010). I organized the codes on a Microsoft Excel spreadsheet and used color coding to differentiate between the codes and analysis. As this was a hermeneutic phenomenological study, in concordance with Sloan and Bowe (2014) and Smith et al. (2009), the themes depicted how I interpreted the participants' reflection of their lived experience of the phenomenon of parallel processing while in clinical supervision. The emergent themes included: (a) a desire to help others, (b) the supervisor's contribution to the professional development of the supervisee, and (c) the supervisee's description of the phenomenon of parallel processing. Two subthemes came forth under the supervisee's description of the phenomenon of parallel processing, which was (a) the supervisees' perceptions of the supervisor's response to the phenomenon of parallel

processing and (b) the supervisee's perspectives of the impact of the supervisor–supervisee relationship during the phenomenon of parallel processing.

### **Theme 1: A Desire to Help Others**

The theoretical framework of this study was intersectionality and according to Hwang and Beauregard (2021), the social identities of a participant group will interact to form qualitatively different meanings and experiences based on the individual.

Additionally, van Manen (1990) stated that phenomenology describes how a person orients to a lived experience. Therefore, the initial goal was to encourage participants to describe their motivation to pursue the counseling profession, as this would orient the participants to the lived experience of clinical supervision and the phenomenon of parallel processing. As the participants individually oriented themselves to the experience, they identified their desire to become a counselor was based on a desire to have a positive effect in their communities because of their personal experiences. For instance, Emma stated,

Growing up, one of my aunts was in that profession, and I kind of saw how much help she had to give to the community. You met a client 10 years ago, and he remembers you even 10 years after—that is something very amazing, and tells you that you really assisted him in this and that. I think that is very fulfilling.

John provided a broader view of his desire to help others. His goal was to provide a “better quality of counseling than his family members received.” Leslie was also personally motivated as she reported being a victim of sexual assault:



While growing up, I was a victim to sexual abuse. And the abuse really affected me mentally. And I felt I really needed counselling. And I started to think about other people also who have been victims of sexual abuse and how they have been affected mentally, and others are not able to access the mental health services, probably therapy, counseling. I thought that I should pursue some career related to that.

Sally cited the “marketability” of the profession and highlighted the desire to work with children and their parents while also addressing client struggles or parenting issues in her local community. Ashley stated, “In the community that’s really dynamic, and there are very many issues affecting day-to-day living in terms of mental health, in terms of social inclusion.”

Each participant was motivated to come into the profession to positively contribute to the well-being of others. Participants’ displayed awareness of how the application of their acquired counseling skills and knowledge could have a positive impact, not just on their community, but in some cases, on the public at large. The combination of these elements, along with a supervisor’s contribution to their professional development, allow supervisees to provide positive social change in their respective communities.

## **Theme 2: Supervisor’s Contribution to the Professional Development of the Supervisee**

The clinical supervisor has the responsibility to provide guidance and training in the process of clinical supervision and is central to the lived experiences of the supervisee

and their interpretation of the clinical supervision process. Clinical supervision is the platform identified by Sarnat (2019), Searles (2015), Watkins (2017), and Zetzer et al. (2020) where the phenomenon of parallel processing can be identified and addressed. Exploring the conditions under which the phenomenon of parallel processing is successfully resolved would be a contribution to research, especially if the phenomenon of parallel processing occurs early in the supervisory relationship (Zetzer et al., 2020).

I sought to consider participants' intersectionality in accordance with Tarshis and Baird (2021) as the theory of intersectionality addresses power dynamics and is also relevant to clinical supervision. The participants provided differing perspectives of their interpretation of clinical supervision; however, collectively, all participants communicated respect and gratitude as they felt their respective supervisors were contributing to their professional development. For example, Leslie, who works with autistic clients in her internship, stated,

Because if a patient doesn't recover or a patient doesn't get better from the condition that the patient is going through, then it means maybe there is something wrong. My reactions [to supervision] have been positive because I'm sure that the directions that he gives me, they come from a, they are meant to improve my know-how of serving.

John, who is in his state residency, is supervised by an African American woman. John stated, "She [the supervisor] would make statements like 'I hadn't really thought about that before,' or 'Maybe that's something we should look into further during next session or at another time.'" Based on this statement, John perceived his supervisor's

contribution to his professional development as a collaborative process. He also stated, “I’ve always been a fan of mentorship even during my time in the Navy, and I’ve always been really open to having a mentor, having somebody who can mentor properly.”

Sally, who is supervised by an African American man, was open in her assessment of the supervision process. She stated that she asks questions rather than makes assumptions. Sally said, “I am appreciating the fact that it’s okay not to be okay always, and it’s okay to speak out to someone else, a third party that you feel that you can trust, yeah, because things can get overwhelming.” Each participant had a prescribed frequency of supervision as outlined by Council for Accreditation of Counseling and Related Educational Programs (2016) and the Association for Counselor Education and Supervision (2011).

In accordance with Green and Flasch (2019), Kanwal (2021), Kelly et al. (2021), and Thompson and Bridges (2019), participant responses and personal feelings reflected how their various forms of identity interrelate and provided an additional perspective of supervisees’ lived experiences while in clinical supervision. For example, Emma, who acknowledged being a victim of trauma and stated, “In the initial stages, when I was starting out, it was creating a lot of anxiety. Most cases are pertaining to maybe the kind of trauma you underwent. So, you kind of relate to that.” Ashley verbalized a feeling of support in supervision: “So he’ll just basically say what he thought was wrong, what he thought was right, and commend you for the good job, which I find really good because you cannot be always dwelling on the negatives.” Based on the participants' responses and dependent upon the supervisee's relationship with the supervisor, the supervisees’

lived experiences resulted in greater self-awareness, the development of their professional identity, and a willingness to address the phenomenon of parallel processing.

### **Theme 3: Supervisee's Description of the Phenomenon of Parallel Processing**

The research question for this study explored the phenomenon of the parallel process while the participant is in clinical supervision. Researchers such as Searles (2015) and Watkins (2017) have stated that the supervisee initiates the phenomenon of parallel processing, and this is supported by the responses of the participants. St. Arnaud (2017) explored case studies and concluded that the supervisee's difficulties or wounds might appear while in supervision. The responses provided by the participants build on this conclusion as they verbalized how their difficulties and wounds occurred in the therapeutic environment and in supervision. However, Zetzer et al. (2020) stated that there is limited research on the supervisee's experience because the literature has relied on the supervisor's description of the phenomenon of parallel processing. Each of the participants described differing accounts of their experience of the phenomenon of parallel processing. For example, Nina described the phenomenon occurring while sitting with her client as she stated,

It was a young lady, so it felt like she related more with a younger me. And the reason I related why it related to the younger me, [was] it kind of reflected-- even when she was telling me the issues she was going through, I could see a younger version of me; victimization. I saw that vulnerable child, that child who didn't have a say, that child who everyone thought was okay. I felt like I really wanted to defend her.

Although Watkins (2017) defined the phenomenon of parallel processing as an unconscious re-enactment of the therapy session, the responses provided in this study provide data that could potentially broaden that definition. For instance, Emma also described the phenomenon as occurring while she was sitting across from the client as she stated, “there is a dramatic event that a certain client is trying to explain to me, and it seemed so distressing I ended up ending the session before [time] and having to talk with the supervisor.” Emma spoke in the third person as she responded, which I interpreted as distancing herself from that moment in time. As I explored her thought processes further by asking what she was feeling and thinking, she stated, “...and most of them [my feelings] are pertaining to maybe the kind of trauma I underwent. You kind of relate to that. You can drift away, and then you are running into thoughts about your whole situation, how it went.” As we discussed it further, she did not initially disclose or re-enact her personal experience during her supervision session.

Alternatively, Sally became aware of her reactions to the phenomenon of parallel processing while she was in supervision as she stated, “By showing me the fault that I had, for example, in failing to write proper notes and also in failing to keep that conversation going to get this information from the client, and also to get through exactly the situation on the ground in terms of the support system.” As I explored her interactions with her supervisor, the participant was not aware of the occurrence of the phenomenon of parallel processing. She acknowledged resistance to supervision guidance, and because of her supervisor’s feedback, her behavior was a re-enactment of the therapy session as the client was resistant to the therapist’s guidance.

Ashley described her experience of the phenomenon of parallel processing as a re-enactment of the client's behaviors as she described the client's behavioral patterns and his refusal to take accountability to implement strategies that were suggested during the session; she described her own behaviors, "so it was kind of felt like I was refusing to be accountable [for not following the supervisor's guidance]." Leslie described one of her experiences with the phenomenon of parallel processing as occurring during the session,

It was a young lady, so it felt like she related more with a younger me. And the reason related why it related to the younger me, I saw that vulnerable child, that child who didn't have a say, that child who everyone thought was okay because you don't really keep so much for yourself, and probably because the parents seem to be okay, so you don't want to be the one with the issue. Somehow you are neglected, but it's not all that pronounced.

In another experience with the phenomenon of parallel processing, Leslie stated,

I feel even more guilty. How do I say it? More guilty than I was. If I disagree with something and did not do what my supervisor said that I need to do and that decision that I took didn't work, it makes me feel more guilty. And that's where I now change and do what I was told to.

Leslie expressed feelings of guilt because of her therapeutic decision-making. Based on what she had shared regarding her personal history, I explored her cognitive processes from the perspective of experiencing a traumatic event and experiencing feelings of guilt. She was responsive when we talked about the presentation of some of the clients she had worked with, stating, "Okay, they tend to regret a lot. For instance,

someone who is depressed because of domestic violence or partner intimacy violence, they tend to regret a lot. They aren't happy. " However, she would not personalize her response from this perspective, although she disclosed in our interview that she is a trauma victim.

According to Hwang and Beauregard (2021), intersectionality is the idea that social identities such as race, gender, and class interact to form qualitatively different meanings and experiences based on the individual. John's experience with the phenomenon of parallel processing was facilitated by the dynamics of his intersectionality. John shared his experience with power dynamics as influencing his decision to see a client he felt pressured into counseling. As the participants described their lived experience with the phenomenon of parallel process, one subtheme that emerged was their supervisor's response to the supervisee's transference reactions.

***Subtheme 1: Supervisees' Perception of the Supervisor's Response to the Phenomenon of Parallel Processing***

According to Sarnat (2019), the best supervisory dyad occurs when the phenomenon of parallel processing is identified and addressed at the moment. The participants' responses supported this statement but also built on it, as some of the participants' responses infer that the supervisor's response is not a one-time occurrence. Effectual supervision aims to aid the supervisee in their personal and professional development (Sarnat, 20019; St. Arnaud, 2017). For instance, Emma stated,

Probably telling me to take a break from that client. I've had a situation of that.

[The supervisor stated] And also to get some help. I didn't realize initially when

starting out that I needed some help on a certain issue, specific issue, till the supervisor told me. So, I think every day is kind of a learning process for me, and I realized that even if you're in that position to help, you will also need help at one instance.

Sally's perspective also supported how the ongoing response of the supervisor to her experience of the phenomenon of parallel processing was effective,

He wasn't all that negative about it, but it kind of sounded like he made a lot of sense because the client's needs are very specific regarding the support system needs. And for me, I didn't really consider the support system so keenly, I just made assumptions that they were readily available for him. I meant to help but when you're not so keen, you just talk to a friend, but you don't know the kind of friends this person has."

Similarly, Ashley, Nina, and Leslie verbalized how their supervisor's responses contributed to their personal and professional growth. This was evident in Ashley's response,

I felt like the supervisor pointed out that I was not willing to tell the patient to be responsible enough, [and I was not willing] to be accountable enough. At the same time, the patient is not willing to take up responsibility.

Leslie's response indicated some fragility in her relationship with the supervisor a, "I haven't [seen a reaction] because I can't even let them know that I disagree with them." Alternatively, Nina felt heard and empowered because of the supervisor's response,



He's the kind of a person who is very open, like a person who you can talk to freely, who you are able to think independently on your own most of the times, like you're free to air out your views.

As the participants continued to describe their lived experience with the phenomenon of parallel process, another subtheme that was noticed was the impact of the relationship that existed in the supervisory dyad and during the phenomenon of parallel processing.

***Subtheme 2: Supervisee's Perspective of the Impact of the Supervisor–Supervisee Relationship During the Phenomenon of Parallel Processing***

Based on the data gathered from the participants, the relationship between the supervisor and the supervisee is critical as the relationship contributes to the lived experience during the clinical supervision process and the phenomenon of parallel processing. The relationship between the supervisor and supervisee and the feedback from the supervisor impacted the supervisee's developmental growth in self-awareness, professional growth, and professional identity. The phenomenon of parallel processing can provide a resource for the clinical supervisor to utilize their therapeutic mentoring skills. According to Sarnat (2019) and Zetzer et al (2020), the phenomenon of parallel processing could enrich supervision as there is the opportunity for the supervisee and the supervisor to share experiences which can facilitate a deeper relationship. Sarnat (2019) stated that multiple approaches, such as role-playing or Socratic questioning, can be used to address the phenomenon of parallel processing. However, all the approaches identified are dependent on the strength of the collaborative relationship between the supervisor and

the supervisee. The relationship between the supervisor and the supervisee can provide a means to deepen the supervisory work (Searles, 2015).

An important aspect of exploring the supervisor--supervisee relationship required the application of the lens of intersectionality. Green and Flasch (2019) stated that intersectionality should be considered a component of clinical supervision while also addressing the development of the supervisee. Kanwal (2021) stated that intersectionality includes multiple aspects of diversity. From the perspective of gender, all the participants had supervisors of the opposite gender. All participants felt the gender of their supervisors had no impact on the relationship. In addition to gender differences, the dynamics of intersectionality in John's supervision dyad included differing races and disability. However, he perceived the relationship as a process that would build his skills and challenge his limitations. Emma used words such as overwhelmed, distressing, vulnerable, and willing to trust to describe her relationship with her supervisor and her reactions as she processed the phenomenon of parallel processing with her supervisor. Her use of the word "vulnerable" was powerful, indicating a high trust level between Emma and her supervisor.

Although no other participant used the word "vulnerable," the gradience of the participant's vulnerability seemed to contribute to the supervisor--supervisee relationship. As Sally discussed her relationship with her male supervisor, she did not address the gender differences. Instead, she reflected on her re-enactment of the client's behaviors and perceived her similarity as a weakness. Although she felt embarrassed because of her behavior, she verbalized respect for her supervisor and a willingness to take

accountability. She stated, “So, I had to take the issue keenly and write notes again and have a session with the client again and use proper communication. It’s very necessary.”

When discussing intersectionality differences, Nina did not indicate how it impacted her interactions with her male supervisor. She described her relationship with her male supervisor as supportive,

He’s the kind of a person who is very open, like a person who you can talk to freely, who you are able to think independently on your own most of the times, like you’re free to air out your views.

Ashley and Leslie verbalized some awareness of the impact of their intersectionality differences in the relationship with their male supervisors, they were vocal in their perspective that the male supervisor did not understand the needs of female clients.

Ashley stated,

I think it’s really frustrating because you kind of want to help the supervisor understand where you’re coming from, but at the same time, it’s really hard to explain because the supervisor has his own way of thinking regarding the matter. So, me, I’m thinking because of the past experience, because the supervisor has not had the experience, he cannot really understand where the client is coming from.”

John cited the power dynamics of the supervisor--supervisee relationship during the phenomenon of parallel processing, “I’m third-generation military, so my dad taught me respect for chain of command, respect for elders, [and] respect for women.” In addition to intersectionality, which is a composition of race, class, and gender, which

interacts to form qualitatively different meanings and experiences based on the individual, John's response appeared to be indicative of his multicultural complexity. Multicultural complexity explains the intricacies of multiple grounds of identity, privilege, and marginalization represented by intersections (Hwang & Beauregard, 2021; Peters, 2017). This concept is evident in John's statement:

I can't tell you how many times I would do something in the military I just simply did not want to do, but I would do those things trusting that whoever was telling me to do those things was trying to lead me in a better direction, was trying to help me in some way. And to be honest, I did retire at the highest enlisted pay grade, E9, so I would say my experience with being open with that stuff has been very positive. It doesn't change how often I feel those feelings of pressure or whatnot. But I would say I have learned to kind of-- how have I heard it? Keep my mouth shut and color.

John acknowledged intentionally masking his feelings,

I can't tell you how many times I would do something in the military I just simply did not want to do ... But I would say I have learned to kind of-- how have I heard it? Keep my mouth shut and color.

John did not feel the supervisor was aware the phenomenon of parallel processing had occurred as a result of masking his reactions.

### **Summary**

The lived experiences of minority supervisees, who have experienced the phenomenon of parallel processing while in clinical supervision, are complex based on

the responses from the participants of this study. In most instances, the participant was aware of their emotions, and, based on their relationship with their supervisor, they either chose to be vulnerable and disclose their thoughts and feelings or to mask those thoughts and feelings. I focused on capturing the phenomenon's attributes as it occurred for the participant. As Zetzer et al. (2020), Sarnat (2020), and St. Arnaud (2017) stated that the phenomenon is a reflection process. It was noted that when the supervisee was willing to trust that the supervisor would be supportive and non-judgmental, the experience of the phenomenon could be a teachable moment for the supervisor and the supervisee (Gundle, 2015; Watkins, 2017; Zetzer et al., 2020). Although the supervisee initiates the phenomenon, the relationship between the supervisor and the supervisee can have an impact on the outcome of the lived experience. In the next chapter, I discuss the findings of the study, review the limitations, and make recommendations for further research.

## Chapter 5: Discussion, Conclusions, and Recommendations

### **Introduction**

In this study, I explored the lived experiences of minority supervisees who experienced the phenomenon of parallel processing during clinical supervision. The nature of the study was qualitative, with a hermeneutic phenomenological research design. According to Brown-Rice and Furr (2016), approximately 10% of supervisees are ill-suited for the counseling profession. Additionally, multiple researchers have cited the need for additional research to explore the role of intersectionality in the preparation of supervisees (Sarnat, 2019; Thompson & Bridges, 2019; Watkins, 2017; Zetzer, 2015; Zetzer et al., 2020).

A key finding of this study is that the phenomenon of parallel processing is outside of the supervisees' awareness, and this aligned with the conclusions of many other researchers (Sarnat, 2019; St. Arnaud, 2017; Watkins, 2017; Zetzer et al., 2020). Additionally, regardless of the supervision model chosen by the supervisor, the supervisor-supervisee relationship is an essential component in the development of the professional identity of the supervisee and the facilitation of the parallel processing phenomenon as evidenced by participants' responses in this study and in alignment with existing research (Bernard & Goodyear, 2019; Peters, 2017; Phillips et al., 2017; Sarnat, 2019). Another significant finding in this study relates to the importance of considering the intersectionality of participants. Each participant's intersecting identity provided an individual perspective of their lived experiences.

### **Interpretation of the Findings**

The findings of this study support the efficacy of addressing the phenomenon of parallel processing in clinical supervision. Researchers have conducted studies on parallel processing and agree that the supervisee initiates the phenomenon; however, researchers have explored the phenomenon from supervisors' perspectives, and few studies have captured supervisees' voices (Sarnat, 2019; Searles, 1955; Watkins, 2017; Zetzer, 2015; Zetzer et al., 2020). While Sarnat (2019) used vignettes to explore the phenomenon of parallel processing in clinical supervision, Watkins (2017) noted that this approach is a limitation in justifying the phenomenon.

The theory of intersectionality provided the lens for this study and, as a result, the data extend knowledge of the phenomenon of parallel processing from supervisees' perspectives. Three themes emerged from the data to describe the lived experiences of minority supervisees who have experienced the phenomenon of parallel processing while in clinical supervision: (a) a desire to help others, (b) the supervisor's contribution to the professional development of the supervisee, and (c) supervisee's description of the phenomenon of parallel processing. Two subthemes emerged from the supervisee's description of the phenomenon of parallel processing: (a) the supervisee's perception of the supervisor's response to the phenomenon of parallel process and (b) the supervisee's perspective of the impact of the supervisor-supervisee relationship during the phenomenon of parallel processing. I connected each of the themes back to suggestions in previous literature, which added credibility to the method and results of this study.

### **Desire to Help Others**

The six participants described their reasons for choosing the counseling profession, and an overarching message was to ensure that those in their community would have access to mental health services. All participants wanted to provide mental health services that facilitate positive social change in their communities. Two of the participants were trauma victims and described how the lack of treatment hindered their psychological growth but also motivated them, as they did not want anyone else in their community to have this experience. One participant verbalized the experience of watching a family member's negative experiences in counseling and how they felt they could contribute to the profession and ensure the public is well served. The diversity of the participant group and their resultant view of social justice based on the intricacies of identity, privilege, and marginalization provided additional research data related to the lived experiences of the minority supervisees while experiencing the phenomenon of parallel processing. Per Zetzer et al. (2020), the lack of ethnic and racial diversity in previous research related to the phenomenon of parallel processing has been a significant limitation, and it was recommended that future studies recruit participants with varying identities because culture has a role in the supervisor–supervisee relationship.

### **Supervisor's Contribution to the Professional Development of the Supervisee**

In each model of clinical supervision, the focus is on the supervisee's growth as a counselor and their professional development (Bernard & Goodyear, 2019; Cruikshank & Barden, 2017; Krug & Schneider, 2016; Sarnat, 2016;). In this study, each participant's response reflected their understanding that the process of clinical supervision would



provide guidance and increase their ability to work with their assigned clients. In some cases, participants communicated relief as they realized the expectation of their supervisor was not perfection but instead a willingness to process the client's issues. Overall, each participant communicated respect for their supervisors. I noted in this study that diversity in the supervision dyad was not a hindrance in the supervisor-supervisee relationship. In addition, the quality of the supervisor--supervisee relationship contributed to the participant's growth and willingness to collaborate during clinical supervision.

### **Supervisee's Description of the Phenomenon of Parallel Processing**

The responses of each participant provided data that captured the essence of the phenomenon as they relived the experience. As the six participants described their thoughts and feelings, they connected the experience of sitting in the therapeutic environment with their client as the start of the phenomenon. This was particularly important when interviewing participants with a history of trauma because these data add to the literature related to the transference reaction in clinical supervision, which states the supervisee's transference reactions may touch on the supervisee's personal struggles as well (St. Arnaud, 2017). The data from this study indicates that the participants did not re-enact the behavior of the client but did display reactions to their personal traumatic memories, which mirrored the client's presenting issue. Therefore, the data from this study add another perspective to a key attribute of the phenomenon of parallel processing, which is defined as a behavioral pattern displayed in the therapeutic environment and then reenacted in supervision (Sarnat, 2019; Searles, 2015; Zetzer, 2015; Zetzer et al., 2020). In cases where trauma was not a factor, two participants commented that cultural

dynamics contributed to the phenomenon, such as automatic internal reactions instead of verbal or nonverbal displays of the parallel processing phenomenon. All participants' reactions aligned with the dynamics of intersectionality, which means their personal, interpersonal, and social histories contribute to their perspectives and subsequent reactions (Green & Flasch, 2019; Kanwal, 2021, Kelly et al., 2021; Thompson & Bridges, 2019).

As the participants discussed the phenomenon's occurrence and subsequent interactions with their supervisor, it was clear the supervisor–supervisee relationship facilitated the supervisee's willingness to disclose the internal dissonance experienced in the therapeutic environment. The strength of the relationship was also meaningful as Leslie described her willingness to be “vulnerable” as she processed the client's case and related her personal history and reaction to the client's scenario. St. Arnaud (2017) and Sarnat (2019) addressed how attending to the phenomenon of parallel processing can deepen the supervisor relationship. However, research does not address vulnerability on behalf of the supervisee in the supervision dyad. Not every participant recounted their experience in this manner, as two participants had a different reaction and chose not to disclose their feelings or thoughts to their respective supervisors because they did not believe they would be acknowledged. In these cases, the supervisor–supervisee relationships were viewed as a power dynamic. The intersecting identities present for the supervisee created a perspective that did not allow them to experience interactions that may deepen the relationship. Perhaps more importantly, these participants did not perceive that their supervisor had created a space that invited such interactions.

All participants denied a negative impact of gender or race differences. The participants' responses reflected their willingness to disclose their reactions based on their relationship with their supervisor. Participants withheld their thoughts and feelings from their supervisor if they felt they would be judged or criticized. Participants indicated that their perceptions were sometimes determined by the supervisor's responses or reactions to the client's scenario and assumed the supervisor would have a negative perception of them. For example, one participant felt the supervisor did not hear or understand the client and would react similarly to the participant's responses in supervision. However, when the relationship with the supervisor was described as tenuous, the participant would maintain a guarded stance. The participant believed the supervisor was not aware of the occurrence of the phenomenon of parallel processing and therefore did not notice the opportunity to use their therapeutic mentoring skills or deepen the supervisor-supervisee relationship (Sarnat, 2019; Zetzer et al., 2020).

### **Limitations of the Study**

One limitation of this study was the participant's lack of awareness of the phenomenon of parallel processing. The definition of the phenomenon was provided in the Informed Consent, and the definition was re-emphasized as a part of the Interview Protocol (Appendix B) to address this limitation. It was necessary to use a semi-structured interview protocol to elicit details of the participant's experience and to capture the phenomenon as clearly as possible. It was equally important to use appropriate techniques to enable the participants to orient to the lived experience and describe their feelings and perceptions as the phenomenon unfolded for them. The lack of

diversity among the participants from the perspective of ethnicity, religion, and sexual orientation was also a limitation of this study. Although the data gathered from this study contributed to the literature, there were only six participants, a small percentage of the total number of supervisees in clinical supervision who may have experienced the phenomenon of parallel processing.

### **Recommendations**

Watkins (2017) and Zetzer et al. (2020) stated that most research into the phenomenon of parallel processing is conducted using case studies or examples. Similarly, St. Arnaud (2017) investigated the clinical utility of the phenomenon of parallel processing by exploring case studies and concluded that a supervisee's difficulties or wounds might appear while in supervision. The participants in this study in this study were supervisees in clinical supervision. Each participant provided data that described their experience with the phenomenon of parallel processing in a consistent manner which allowed some insight into the supervisee's lived experience.

Watkins (2017) acknowledged that when multicultural diversity is ignored during the phenomenon of parallel processing, supervisors miss the opportunity to identify and reduce biased practices. However, Peters (2017) stated that a singular multicultural framework is insufficient as it does not meet the changing needs and identities of supervisees, the supervisees' clients, or the populations served by the counseling profession. The six participants in this study represented the diverse groups of ethnicity, race, disability, and gender. However, diversity is also a limitation of this study as diverse sexual orientation and religion groups were not a part of the population sample as no

respondents met those criteria. It is recommended that additional research be conducted to include as many diverse groups as possible to increase understanding and potential development of differing multicultural frameworks for supervisees and clients.

The use of semi-structured interviews was an effective approach to data gathering since the supervisee was not familiar with the phenomenon of parallel processing. The participants consistently identified the supervisor--supervisee relationship as a factor in their lived experience with the phenomenon of parallel processing and clinical supervision. I recommend additional research to gather data that may provide insight into the strength of the correlation between the supervisor--supervisee relationship and the impact of the supervisor's responses on the supervisee's professional development. In each of these studies, it would be equally important to consider the intersectionality of supervisee as research has found this factor contributes to successful clinical supervision (Berger et al., 2018; Bernard & Goodyear, 2019; Peters, 2017; St. Arnaud, 2017; Zetzer, et al., 2020). Additionally, studies to explore how the supervisor would respond to the supervisee's perception would provide data to guide training in multiculturalism and intersectionality. The results of these studies could facilitate growth in the domain of supervision.

### **Implications**

The implications for social change illuminated in the data from this study included several important components. First, the supervisor's willingness to address the phenomenon of parallel processing as it occurs in the supervision dyad will deepen the supervision relationship and provide opportunities to provide mentoring (Sarnat, 2019;

Zetzer et al., 2020). In this study, it was found that the supervisor--supervisee relationship can provide an atmosphere that invites vulnerability on behalf of the supervisee in the supervision dyad. There are supervisees who are emotionally or mentally wounded and have chosen the profession of counseling (Brown-Rice & Furr, 2016; Peters, 2017). As their wounds emerge during the phenomenon of parallel processing, the supervisor has an opportunity to provide guidance, and the supervisee has an opportunity to help resolve their issues. Sarnat (2019) stated that supervisees need to develop complex skills and emotional and relational capacities to become effective practitioners. Furthermore, because of the supervisee's personal experience and professional growth, the implication for positive social change is found in the clinical supervisor's role modeling, which could contribute to the ability to become effective practitioners. Essentially, a rippling effect could occur as the supervisee could aspire to become a counselor educator and integrate the skills they have learned with their future students and supervisees. The results of this study and future research could provide data that further enhances our understanding of the phenomenon of parallel processing and multiculturalism.

### **Conclusion**

The phenomenon of parallel processing provides an opportunity for clinical supervisors to prepare the supervisees to become effective counselors when working with the public. Based on the data gathered in this study related to the lived experience of the supervisee, a contributing factor to addressing the phenomenon of parallel processing depends on the supervisor--supervisee relationship. The strength of that relationship depends on the supervisor's ability to form a collaborative bond. That collaborative bond

can facilitate not only the willingness of the supervisee to be vulnerable with their thoughts and emotions when working with clients but also open to receiving the constructive feedback provided by the supervisor. Collectively, these factors will positively impact social change as the supervisee will have the opportunity to be well-equipped to provide services to the public.

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## Appendix A: Recruitment Email

Dear Potential Participant:

Thank you for your consideration to participate in this research study. Attached please find the Informed Consent. Please review it thoroughly and do not hesitate to contact me either by email or telephone if you have questions about the study or its purpose. If you decide to proceed, please respond to this email with "I consent".

Kindly,

Dorothy Moore  
 Doctoral Candidate, Walden University

*Upon receipt of consent from the potential participant, the following email will be sent:*

Dear Potential Participant:

Thank you for your consent to participate in this research study. Below please find a demographic survey to confirm that you meet the criteria to participate. The survey should take no more than 2 minutes to complete. Once, your responses are received and reviewed, I will contact you to schedule our interview.

**Demographic Questions:**

Are you currently in clinical supervision either as a student or a state resident? \_\_\_\_\_

What is your racial status (i.e., Caucasian, Black, Bi-Racial, etc.)? \_\_\_\_\_

What is your ethnicity (Hispanic, non-Hispanic)? \_\_\_\_\_

What is your sexual orientation? \_\_\_\_\_

Do you have a religious affiliation? \_\_\_\_\_ If so, please specify \_\_\_\_\_

Do you have a disability status? \_\_\_\_\_

Thank you,

Dorothy Moore  
 Doctoral Candidate, Walden University

## Appendix B: Interview Protocol

I am going to ask you questions about your experience as a supervisee in clinical supervision. I am interested in hearing about your experience as a minority individual during the phenomenon of parallel processing. For this dissertation, following the literature, I define the phenomenon of parallel processing as your unconscious reenactment of the therapy session material within the supervision sessions (Sarnat, 2019; Searles, 1955; Watkins, 2017; Zetzer et al., 2020). An example of the phenomenon would be when a client communicates helplessness to the supervisee. The supervisee expresses a similar behavior of helplessness in supervision. Another example is when the client displays or verbalizes defensiveness when the supervisee uses the counseling technique of confrontation. In turn, the supervisee verbalizes or shows a similar behavior when the supervisor suggests a course of action that does not align with the supervisee's perspective of a client's case.

**Warm-up Question:** Tell me about your decision to pursue a career in professional counseling.

### **Exploring the process of supervision and phenomenon of parallel processing:**

1. What does a supervision session entail for you?
2. What have been some of your reactions to directions given by your supervisor?
3. How do you feel when you agree (or disagree) with your supervisor's perspectives on a therapeutic issue? Can you provide an example?
4. Please tell me what you remember about your interactions with your supervisor that were similar or the same as a client's interactions with you.

5. What are some outside factors that affected the phenomenon?
6. How did your supervisor aid you in recognizing that your behaviors mirrored a client? Can you provide an example?
7. How was your supervisor's feedback helpful (or not) in developing your professional identity?

Closing

What was participation in this interview like for you today?

I may need to speak with you one more time after the interview for approximately 30 minutes so that you can hear my interpretation of your responses and to hear your feedback to my interpretation. May I contact you for this purpose?

## Appendix C: Flyer

A study of the lived experiences of minority supervisees who have experienced the phenomenon of parallel processing in clinical supervision

**VOLUNTEERS WANTED FOR A DISSERTATION  
RESEARCH STUDY**

You are invited to participate in a research study that seeks to investigate the lived experiences of minority supervisees who have experienced the phenomenon of parallel processing clinical supervision. Your participation in this study will:

- Provide information on your perception of consideration of multiculturalism and diversity in clinical supervision as a supervisee
- Provide increased awareness of how the phenomenon of parallel processing could contribute to the development of the professional identity of the supervisee.

You will be asked to participate in an interview session (approximately 90 minutes). The topic of the interview will be your experience of the phenomenon of parallel processing. The interviews will be audio recorded.

**To participate you must meet the following criteria:**

- 1) Must meet the criteria of minority as it relates to race, ethnicity, sex, age, sexual orientation, disability status, or religion.
- 2) Currently in clinical supervision for either your master's degree in Counseling or in clinical supervision for professional licensure
- 3) Experienced the phenomenon of parallel processing during clinical supervision

**Your Confidentiality**

Reporting of the results will not include any names. All names and personal identifiers will be removed by the researcher, and all audio recordings will be destroyed in five years.

**If you are interested in participating in this study or would like more information, please contact Dorothy Moore. *All communication is confidential.***